

**California Department of Corrections and Rehabilitation  
Division of Juvenile Justice**

**SAFETY AND WELFARE PLAN  
IMPLEMENTING REFORM IN CALIFORNIA**

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**Submitted by the Safety and Welfare Planning Team**

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# Chapter 1 INTRODUCTION

## **The Current System is Broken**

The Division of Juvenile Justice has many good people working for it – hard working, dedicated, and well meaning. The current leadership is professional, knowledgeable, and committed to reform. But if reform is to happen, they will need help. For this is not a system that needs tinkering around the edges, this is a system that is broken almost everywhere you look. It is a system with:

- High levels of violence and fear in its institutions
- Unsafe conditions for both residents and staff
- Antiquated facilities unsuited for any mission
- An adult corrections mentality with an adult/juvenile mix
- Management by crisis with little time to make changes
- Frequent lockdowns to manage violence with subsequent program reductions
- Time adds for infractions adding over eight months to average lengths of stay
- Lengths of stay almost triple the average for the nation
- Hours on end when many youths have nothing to do
- Vocational classrooms that are idle or running half speed
- Capitulation to gang culture with youths housed by gang affiliation
- Low levels of staffing and huge living units
- Abysmal achievement despite enormous outlays for education
- Information systems incapable of supporting management
- Little partnership with counties and a fragmented system
- Poor re-entry planning and too few services on parole
- Enormous costs with little to show for it

It is not just reform that is needed. Everything needs to be fixed.

## **Can It be Fixed?**

Yes. But it will take great effort, money, and lots of time. We know of no other state that has undertaken such major reform that has finished in as short a time (four years) as DJJ proposes. Failure by DJJ to meet a deadline now and then should not be interpreted as failure to reform. The tracking and reporting mechanisms we have identified in Chapter 4, “Monitoring Implementation and Compliance,” will provide clear indications of whether or not reform is taking place and having the effects that are intended.

## California is Different, but not That Different

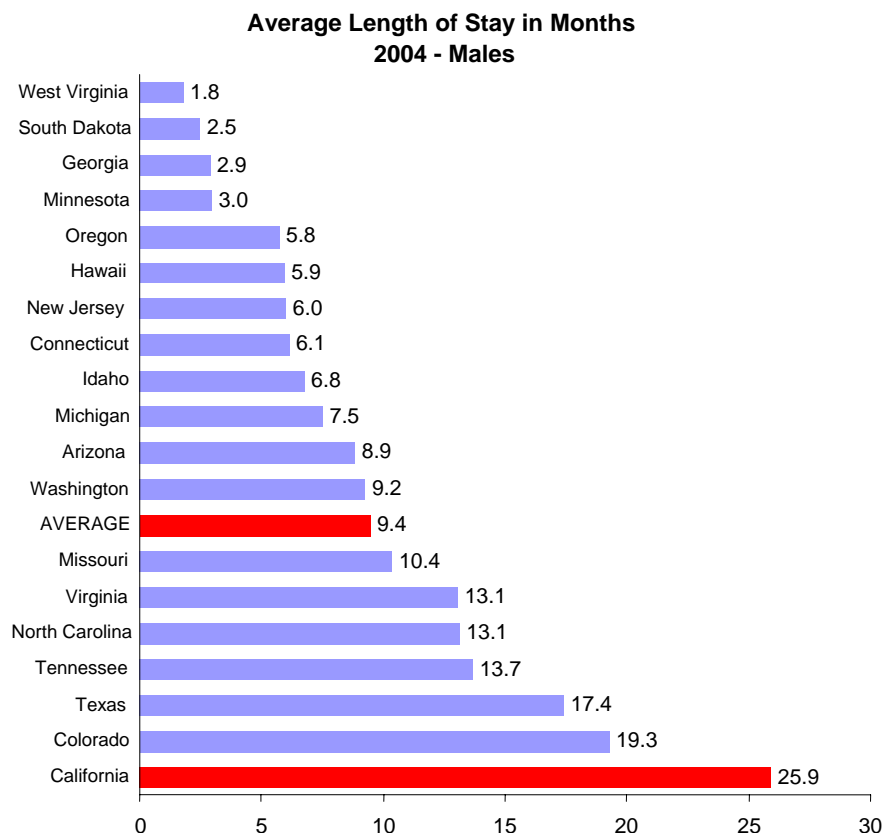
Tolstoy’s *Anna Karenina* begins: “All happy families are happy alike, all unhappy families are unhappy in their own way.” The same may be true of organizations like DJJ. Good juvenile systems share common features, effective juvenile systems use similar methods. Struggling or failing juvenile systems may have problems all their own.

California is in the second category. While none of DJJ’s problems are unique, some are manifested in a California way. The most important of these is violence in its institutions - not

the frequency or level of violence, but the character of it. In the opinion of the Safety and Welfare planning team, what distinguishes violence in DJJ facilities from violence elsewhere is the racial undertone and viciousness of much of the gang violence.

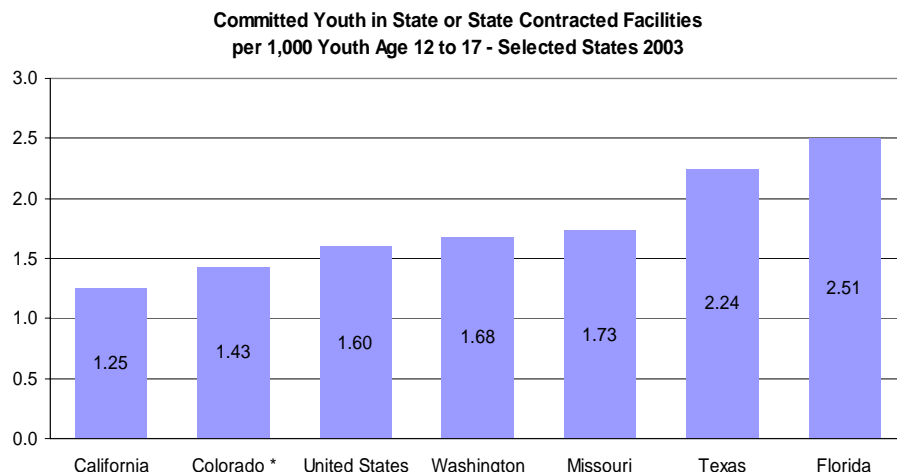
If California has a high level of violence in its facilities, it is not because it has an unusually large number of youth committing violent crimes. In 2002, California had a far lower rate of juvenile violent crime than Illinois or Florida; a lower rate than Pennsylvania, Massachusetts and Louisiana; and a rate comparable to New York and New Jersey.

California is also one of only six states that has an extended age of jurisdiction for juveniles that goes beyond the age of 20. In California, a “juvenile offender” may be 24 years old. No other state has a longer extended age of jurisdiction. This lengthy extended age of jurisdiction contributes to the longest reported average length of stay in a nationwide survey conducted by the Council of Juvenile Correctional Administrators. For males, California’s 2004 average length of stay of 25.9 months was nearly three times as long as the average for the 19 states that took part in the survey. The following chart shows the average length of stay for the states that reported data.

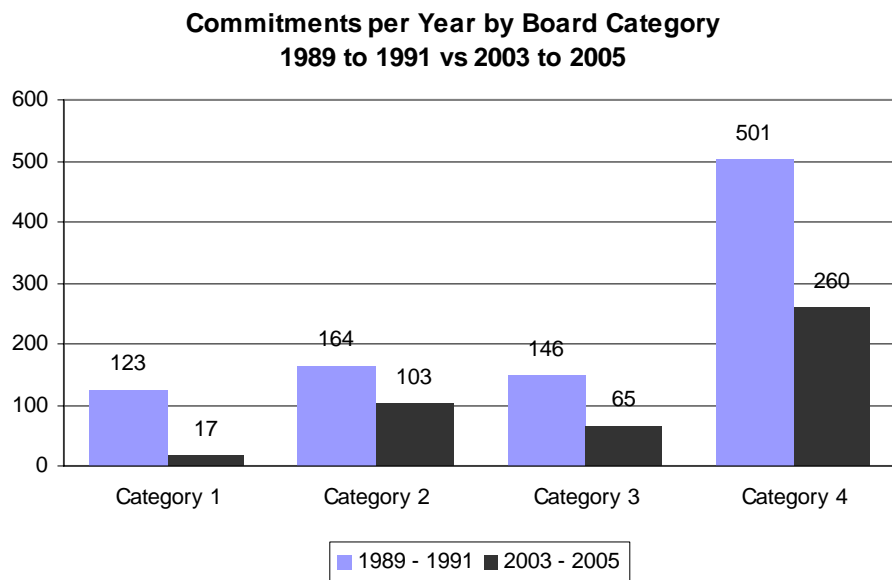


Perhaps surprisingly, one thing DJJ isn’t is a particularly large system. It may seem that way, but for a state the size of California, DJJ is a small system. The following chart shows the number of youth committed to state (or state contracted) facilities per 1,000 youth age 12 to 17 for California and the five states commonly considered exemplary that were visited by the Special

Master and representatives from both sides of the Farrell lawsuit. California is well below the national average and far below some of the states that were visited .



Another common perception about DJJ's facilities is that the current population is somehow harder and tougher than in years past and that this contributes to the problems of today. The data do not support that perception. As a percentage of all commitments, youth committed for the most serious offenses constitute a similar percentage in recent years as they did 15 years ago. And in terms of absolute numbers, there are far, far fewer youth committed for serious crimes today than in past years. The following chart shows the dramatic drop in commitments in the top four Board categories over this period.



### [We Know How to Do Better](#)

California was once a leader in juvenile justice and other states followed its lead. Some of those states remained true to a rehabilitative model while California drifted from its roots. Over time, leaders in the field moved increasingly toward a public health model where evidence-based practices focusing on measurable results began to demonstrate success. Now, a large body of

work that is constantly growing continues to demonstrate that smart on crime is far more effective than tough on crime ever was.

There are effective, replicable systems for evaluating risk and identifying needs which, if properly addressed, will produce good results. There are effective, replicable programs that work for high risk populations who are violent, aggressive or self-destructive. There are programs that work by increasing self-control, empathy, and positive values. Effective programs that cost less (generally far less) than they save include:

- Dialectical Behavior Therapy
- Multidimensional Treatment Foster Care
- Adolescent Diversion Programs
- Mentoring in juvenile justice systems
- Functional Family Therapy (both institution and community based)
- Multi-systemic Therapy
- Other Family-based Therapy Approaches
- Aggression Replacement Training
- Life Skills Training
- Moral Reconation Therapy
- Reasoning and Rehabilitation
- Juvenile Offender Interagency Coordination Programs
- Job Counseling/Search for parolees
- Institution-based Vocational Education
- Institution-based Adult Basic Education
- Cognitive-Behavior Sex Offender Treatment

### **Why Do DJJ Institutions Cost so Much?**

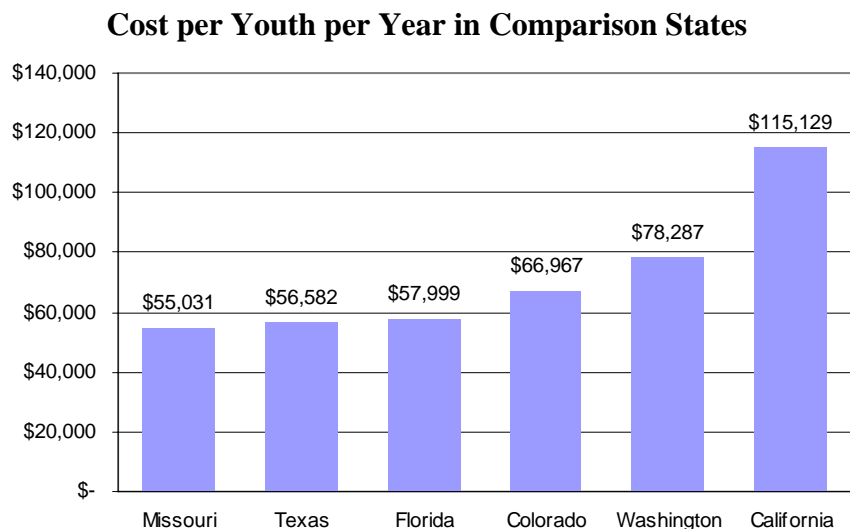
The Safety and Welfare planning team heard different numbers at different times for how much it costs to keep a youth in a DJJ facility for a year. Some of these figures were clearly wrong. The Safety and Welfare planning team used a simple method to estimate the cost per youth per year in DJJ facilities: we took total DJJ costs for 2005, subtracted the cost of parole, and divided the remainder by the average daily institutional population for 2005. Cost figures in Table 1 are from the Governor's 2006/2007 Budget.

**Estimated Average Cost per Youth per Year in DJJ Facilities in 2005**

Category	Cost
Juvenile operations	\$ 178,589,000
Juvenile programs	\$ 138,523,000
Juvenile parole	\$ 40,468,000
Juvenile healthcare	\$ 56,135,000
Total	\$ 413,715,000
Total without parole	\$ 373,247,000
2005 average daily population	3,242
Cost per youth per year	\$ 115,129

### Costs in Other States

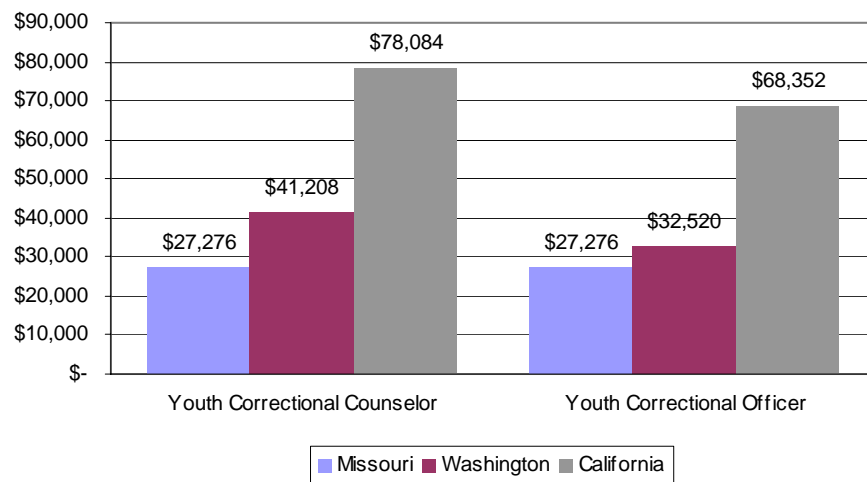
The Safety and Welfare planning team obtained institutional cost data from the five states visited by the Special Master and both parties to the Farrell lawsuit. All of these states report far lower costs than California. The following chart compares costs in these states to those in California.



### How Can This Be?

In the time available, the Safety and Welfare planning team was able to obtain more detailed cost information for two of the comparison states – Missouri and Washington. This included the average annual cost per employee for the job classifications most like California’s Youth Correctional Counselors (YCC) and Youth Correctional Officers (YCO). In these other states, labor costs are far lower. The difference is shown in the next chart.

### **Average Cost per Year per YCC and YCO or Their Equivalent**



It should be pointed out that Missouri does not use Youth Correctional Officers. Both counseling and security functions are performed by “Youth Specialists” in Missouri. Youth Specialists are required to have a bachelors degree or four years of professional experience in a related field. “Residential Counselors” in Washington State are required to have a bachelor’s degree plus one

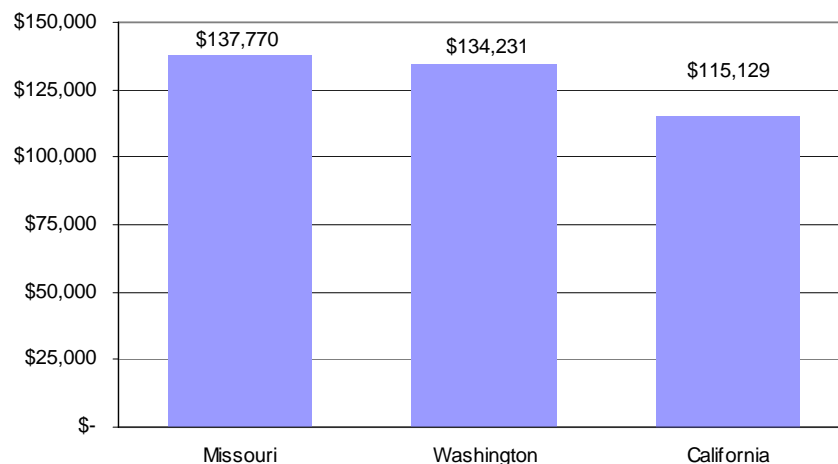
year of professional experience in a related field. A master's degree may be substituted for the year of experience. The minimum qualification for a Youth Correctional Counselor in California is graduation from high school plus one year of experience as a peace officer in an adult or juvenile correctional facility.

We also looked at the consumer price index in each of these states and used that as an indicator of differences in non-labor costs. Differences in CPI numbers were far less than differences in labor rates for key institutional jobs.

### Conclusion

We used this information to estimate how much the Missouri or Washington program would cost if California labor costs and CPI were used. What we found was that the cost of youth confinement in both Missouri and Washington would exceed those in California if they had to pay California labor rates.

**Estimated Confinement Costs per Year in Comparison States  
Using California Labor Rates and CPI**



California's juvenile correctional facilities are not expensive because they are richly staffed. They are expensive because front line staff are well paid.

### **Why Reform?**

California is failing its children. Youth arrive at institutions with serious pre-existing conditions. Many have been abused and neglected, some are mentally ill. All have been failures – most in multiple domains. Not many youth have the chance of leaving California's juvenile correctional facilities with their lives turned around. Given what we have seen, no doubt some leave worse off than when they arrived.

California is failing its taxpayers. This is a very expensive system with little to show for it. We have heard recidivism rates for parolees as high as 91 percent. We don't believe recidivism numbers this high, but failure rates are clearly unacceptable.<sup>1</sup>

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<sup>1</sup> We don't believe these high numbers because, for one thing, according to *Crime in California, 2004*, juvenile felony arrests declined 41 percent from 1995 to 2004. Something must be going right. One has to have an extremely



Every time a youth goes to a DJJ facility and doesn't come out better is an opportunity lost. Proven programs exist that can help troubled youth stay out of trouble in the future – other states and local jurisdictions are using them every day. Good research has identified programs that are effective at reducing future criminal behavior. An impressive and growing body of work shows that we are learning more and more about how to make real changes in young people's lives. Sophisticated cost benefit analysis has been run on scores of programs and a number have been found to cost far less than they save.

California should reform its juvenile justice system, first because it's the right thing to do for California's children, and second because it's the right thing to do for everyone. Successful reform will make safer communities, stronger families, and less crowded prisons.

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broad (and inappropriate) definition of recidivism to approach such numbers even with the very worst categories of offenders.

## Chapter 2 IMPLEMENTING REFORM

There are three things that must happen for juvenile justice reform to have a chance in California.

1. Measures already started must be carried to completion to reduce the level of violence and fear in facilities operated by the Division of Juvenile Justice. Until residents and staff alike feel reasonably safe, reform will not happen.
2. The infrastructure at headquarters and at DJJ institutions must be developed so that the division has the capacity to implement reform. As presently staffed and configured, the division is in no position to manage day-to-day affairs plus implement major reform.
3. The first two steps cannot be accomplished with existing resources. Additional funding is needed. Legislative action and gubernatorial approval are a prerequisite to reform.

### STEP 1: REDUCE VIOLENCE AND FEAR

Reform is not possible if youth or staff fear for their safety. Reducing violence and fear in DJJ institutions should be the highest priority. All other objectives, including the goal of placing youth as close to their family and community as possible, must be subordinated to this objective. Once safety and order are returned, reform becomes possible and other objectives can be pursued.

#### The Problem

The last full year for which we have data is fiscal year 2005 (July 2004 through June 2005). During that time there were:

- 34 medical emergencies from youth-on-youth violence,
- 53 medical emergencies from youth-on-staff violence,
- 145 group disturbances,
- 266 incidents of battery of staff by youth,
- 84 incidents of youth throwing “foreign substances”<sup>2</sup> at staff,
- approximately 80 incidents resulting in lockdowns of multiple youth, and
- an unknown number of incidents of youth-on-youth violence.<sup>3</sup>

Based on reported serious incidents, the most troubled facilities are Stark, Chaderjian, and Preston. Based on medical emergencies related to battery of youth by youth or staff by youth, Stark is in a class by itself with nearly half of all such incidents in DJJ during the last two fiscal years.

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<sup>2</sup> “Foreign substances” is generally a euphemism for feces and urine

<sup>3</sup> DJJ stopped counting youth-on-youth batteries in April 2003. In other parts of this plan we call for immediate resumption of collection of this and other data.

More troubling still is the nature of many of the incidents that occur in DJJ facilities. Of the 67 incidents that resulted in lockdowns during the period from March 1, 2005 through December 31, 2005, nearly 80 percent were related to gang or racial violence.

### **What to Do**

Reducing violence and fear in DJJ institutions will take time, money, and perseverance. What must be done is easy to describe and hard to do.

1. Using objective criteria, identify those youth who have been in the system for six months or longer who have been responsible for a disproportionate number of serious incidents. Similarly, using objective criteria, identify those youth admitted within the last six months with an actuarially high probability of becoming involved in serious incidents. Provide for classification overrides based on staff input.
2. Separate the most dangerous and disruptive of these youth from the rest of the population by placing them in single celled housing units with no more than 24 residents each.
3. As steps 1 through 3 are being implemented, identify staff who will work in these units and provide them with brief, off-the-shelf, training in crisis intervention, de-escalation and conflict resolution skills.<sup>4</sup>
4. Simultaneous with steps 1 through 3, develop an objective re-classification tool and process. Re-classify all youth not less than twice a year. Youth in the high-risk housing units should be re-classified not less than every 90 days. It is through this process that youth move out of the high-risk units and back into the mainstream population units.
5. As steps 1 through 4 are being implemented, develop curricula and training materials for the proposed Behavioral Treatment Program (BTP).
6. Provide training and enriched staffing for units housing youth with high risk for institutional violence and implement the full Behavior Treatment Program in each of these units.

Using an objective classification system as called for in Step 1, preliminary analysis indicates that about six percent of the male population will be classified as very high risk for institutional violence.<sup>5</sup> At present population levels, this is about 170 to 180 residents. The same analysis indicates that another 19 percent (or about 550 males) are at high risk for serious institutional misconduct.

Using 24-person housing units, DJJ will need seven to eight units just to house those youth at very high risk for institutional violence. DJJ's plan to bring nine 24-bed Behavior Treatment Program units on line in the first year may be sufficient. However, with another 550 males at high risk for serious institutional misconduct, DJJ should remain flexible to adding more BTPs and fewer Enhanced Program Units (ETUs) in the first year if circumstances call for it. It should also be open to creating a BTP few units even smaller than 24 beds.

Because these facilities have the highest rates of serious incidents, removal of very high risk youth to smaller single celled housing units should start with Stark, Preston, and Paso Robles. (As noted below, population has already been reduced at Chaderjian.)

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<sup>4</sup> Under Federal Court oversight, L.A. County provided all staff with a three-day training program that, among other things, resulted in a huge decrease in the use of OC (pepper) spray. DJJ might consider using the same program.

<sup>5</sup> The same analysis indicates that while some girls are high risk for institutional violence, no girls are *very* high risk.

Most single-celled housing units in DJJ facilities currently house 48 to 60 residents. Consequently, every time an existing single-celled unit is downsized to 24 beds to accommodate very high risk youth, housing must be found for 24 to 36 youth elsewhere in the system. In the absence of opening new housing, these youth must be absorbed into other existing units. The ability of existing housing to absorb more youth – even if they are low to moderate risk for serious misconduct – is very limited. This is especially true now, following use of this strategy to downsize housing units at Chaderjian in the fall of 2005.

**Recommendation:** Creating new housing units based on the treatment model proposed by DJJ will take time. The plan is to bring 20 units on line each year. Because not all units can be brought on line at the same time, the Safety and Welfare planning team recommends that the first eight or nine units brought on line during the first year of plan implementation be 24-bed Behavior Treatment Program units. These should be brought on line as fast as possible – even if that means starting operation without training staff in the new treatment model.

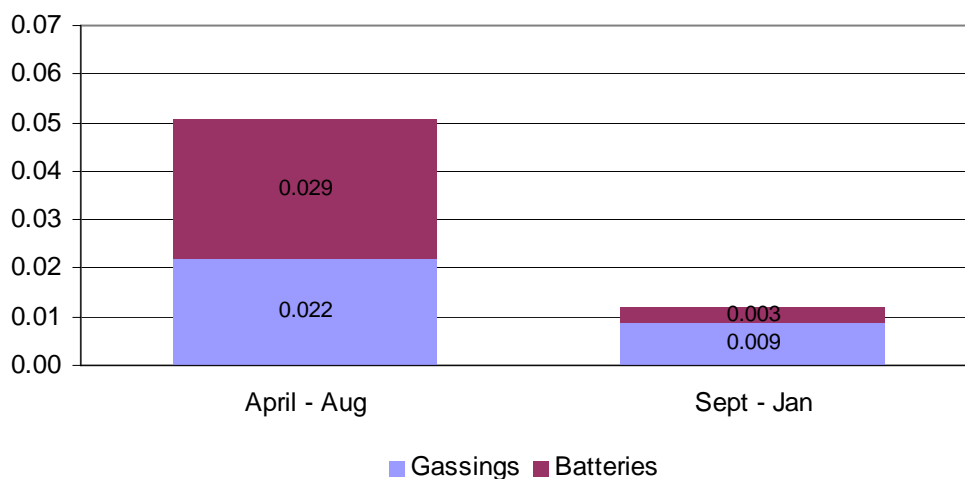
### Will it Work?

Yes. There is evidence in DJJ that making smaller living units can, by itself, reduce levels of violence. In September 2005, DJJ began to reduce the size of living units at Chaderjian by diverting youth to other institutions. By early 2006 all but two of the living units had only 24 residents. Staffing levels were not changed. Taking into account the lower population levels and comparing the five months prior to the population reduction to the five months after the start of the reduction, the data show that serious incidents of youth-on-youth violence (DDMS Level 3) went down 18 percent; Level 3 group disturbances went down more than 80 percent; assaults on staff decreased 76 percent; incidents involving the use of force decreased by 24 percent; and use of restraints went down nearly 45 percent.

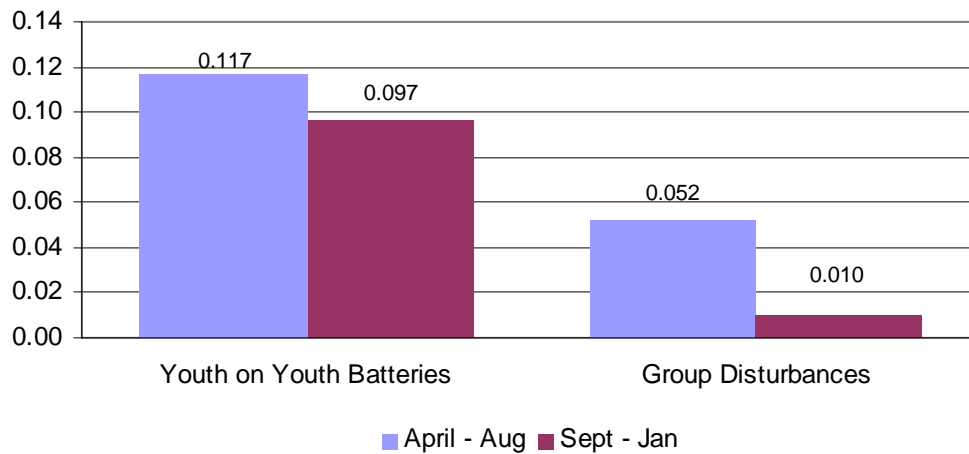
These changes are illustrated in the following graphs.

### Measures of Violence and Use of Force at Chaderjian Before and After Reducing Population Levels

#### Assaults on Staff per 100 Days of Youth Confinement

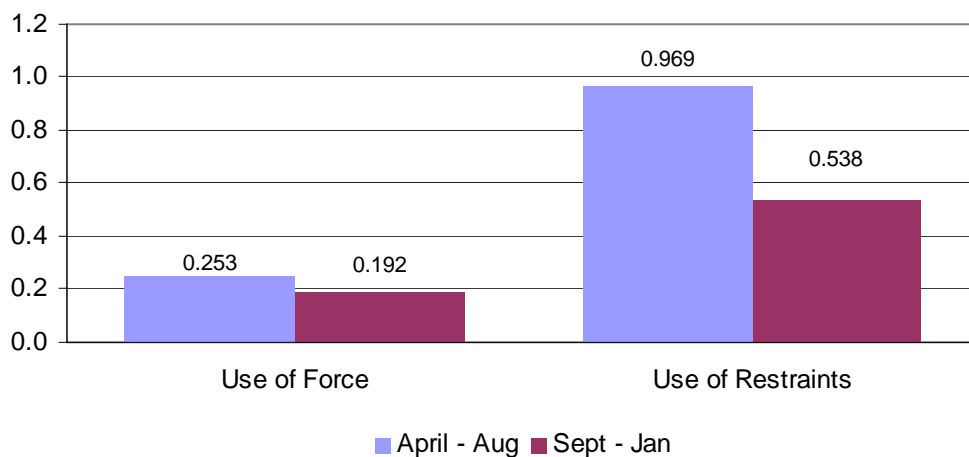


### Youth on Youth Batteries and Group Disturbances per 100 Days of Youth Confinement



### Chaderjian Before and After Reducing Population Levels - continued

#### Use of Force and Use of Restraints per 100 Days of Youth Confinement



These improvements are impressive but what they indicate is a reduction of violence – not the rehabilitation of youth. Reducing population levels is a necessary, but insufficient, precursor to making reform possible.

### Is it Easy?

No. There are many factors that must be considered in the reassignment of high risk youth to new housing units. Youth 18 and older must be kept separate from younger residents – preferably at different institutions. Some high risk youth are in programs they need for parole – how do you continue services? Some high risk youth are mentally ill – where should they be housed and how should they be treated? The primary driver of violence is gang culture and racial animosity – without letting gang membership determine housing assignment, how do you handle gangs? Some high risk youth are pending Morrissey hearings or court action – what do you do with them? The geographical distribution of single celled housing units will not fit the geographical distribution of high risk youth – how do you decide who goes where?

The Safety and Welfare planning team is in no position to dictate the answers to these and the many other questions that will emerge as DJJ moves forward with the separation of high risk youth from the rest of the population. What we can do is outline a process whereby DJJ can take control and make these things happen. That process involves implementation of an interim classification plan.

### **Interim Classification**

The first principle of risk management within correctional facilities is to separate those individuals whose institutional behavior threatens others or the orderly operation of the institution.

In a mature juvenile correctional system this is accomplished through a fair and equitable disciplinary and classification system that removes the youth from the mainstream population and places him or her in a highly structured, intensively staffed, program. Such programs involve small rewards and punishments and intensive treatment based on evidence-based cognitive-behavioral interventions whose target of intervention are the factors contributing to the behavior that got the youth in trouble. The purpose of the program is rehabilitative - not punitive. After the youth obtains the insight and learns the skills necessary to better manage his or her behavior he or she is returned to a mainstream living unit where such skills are practiced, refined, reinforced, and expanded.

DJJ is not a mature juvenile correctional system. Currently, it cannot easily and objectively produce a list of those youth whose behavior threatens others or the orderly operation of the institution.

To help DJJ move beyond this, the Safety and Welfare planning team has developed an interim classification plan to identify high risk youth who should be separated from the rest of the population.<sup>6</sup>

The primary components of a plan to implement an interim objective classification system are as listed below. It should be noted that some of these steps have already been completed by DJJ.

1. Establish an Interim Classification Policy Committee for DJJ (The actual name of the committee is immaterial. If there is an existing body that is appropriate for this work, the work should be assigned to it.) The purpose of this committee is to make decisions and to update classification policy for the division as necessary.
2. Establish (if they do not already exist) Classification Committees at each institution. The purpose of these committees is to conduct incident-based classification reviews in conformance with division policy and to make override recommendations to central classification.

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<sup>6</sup> The Interim Classification Plan was developed by team member Chris Baird and is published separately. Implementation issues relating to the Interim Classification Plan are summarized in this document.

3. Proceed with refining the software coding necessary to score youth on the initial classification and re-classification instruments as developed by Chris Baird of the Safety and Welfare planning team.<sup>7</sup>
4. Proceed with the technical work to develop an electronic classification tool to support the interim classification system. This tool should be capable of being modified and expanded to include other classification data gathering and analysis in the future.
5. Assemble an inventory of institutions and their housing units, both occupied and vacant. Identify their characteristics (dormitory, single cell, or mixed) and current use.
6. Establish a Transportation/Movement Committee to plan and carry out relocation of youth based on the interim classification tool. The Facilities Director and Superintendents need to be part of this group and/or review and approve final movement plans.
7. Identify the critical data elements and outcomes that should be kept and monitored to determine if the strategy is working as intended.

Numerous tasks need to be completed in order to implement the plan. The tasks are listed below according to the groups that will perform them.

#### Tasks for the Interim Classification Policy Committee

The primary task of the Interim Classification Policy Committee is to develop and document a strategy for implementing a classification system designed to reduce violence in the institutions. Their tasks include:

- Review the list of infractions and score them for reclassification value
- Identify characteristics of youth to be included in determination of housing reassignments. These might include such things as location (institution, housing unit, single cell, dormitory), program (general population, substance abuse treatment, mental health treatment, sex behavior treatment, other), age, status (reception, parole violator, return from CDC, etc.), gang affiliation
- Set policy for relative importance of recent versus old infractions
- Set policy for maximum number of high and very high risk youth per housing unit
- Set policy for staffing of units with high and very high risk youth
- Set policy for prioritizing assignment of youth to units for high and very high risk youth
- Set policy for release from units for high and very high risk youth
- Inventory housing unit characteristics at all locations (size, staffing, current use, etc.)
- Identify training needs for staff in units for high and very high risk youth
- Organize a Classification Review Committee at each institution
- Set policy for overrides; develop training materials for overrides
- Arrange for training of institution Classification Review Committee members
- Arrange for training of staff in units for high and very high risk youth
- Review the results of the technical analysis and create preliminary list of youth to move based on prioritization system developed above
- Send preliminary list of youth identified for movement to institutions for local review

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<sup>7</sup> See *Interim Classification Plan*, published separately.

- Based on numbers of youth to be moved (by age and other characteristics) and the survey of housing units, identify housing units for high and very high risk youth
- Review and make decisions on override recommendations submitted by institutions
- Set policy for time-based reclassification
- Set policy for incident-based reclassification, including policy for special circumstances involving allegations of serious misconduct not yet resolved through the disciplinary process
- Set policy for classification of new commitments
- Set policy for classification of parole violators

Technical tasks for the Research Division include:

- Refine initial classification algorithms for youth who have been in system for less than six months; run the program
- Overlay results with information as determined by the Classification Policy Committee
- Develop algorithms for scoring reclassification using scoring system for infraction types developed by the Interim Classification Policy Committee
- Classify youth who have been in the system for six months or more using the reclassification instrument and algorithm
- Overlay results with same information as for initial classification
- Identify data elements to be kept and monitored to evaluate the effectiveness of the interim classification plan
- Provide support to the Interim Classification Policy Committee as needed
- Provide initial classification for youth newly committed to DJJ
- Provide scheduled re-classification for youth

Tasks for institutional Classification Review Committees include:

- Review preliminary list of youth slated for movement and make override recommendations based on policy set by Interim Classification Policy Committee
- Make override recommendations for adding additional youth to movement list
- Make reclassification recommendations for incident-based reclassifications
- Review time-based reclassifications and make override recommendations

Tasks for the Transportation/Movement Committee include:

- Based on final list of youth to be moved and units designated for high and very high risk youth, devise movement plan
- Relocate youth displaced from units designated for high and very high risk youth
- Relocate youth designated for movement into units for high and very high risk youth

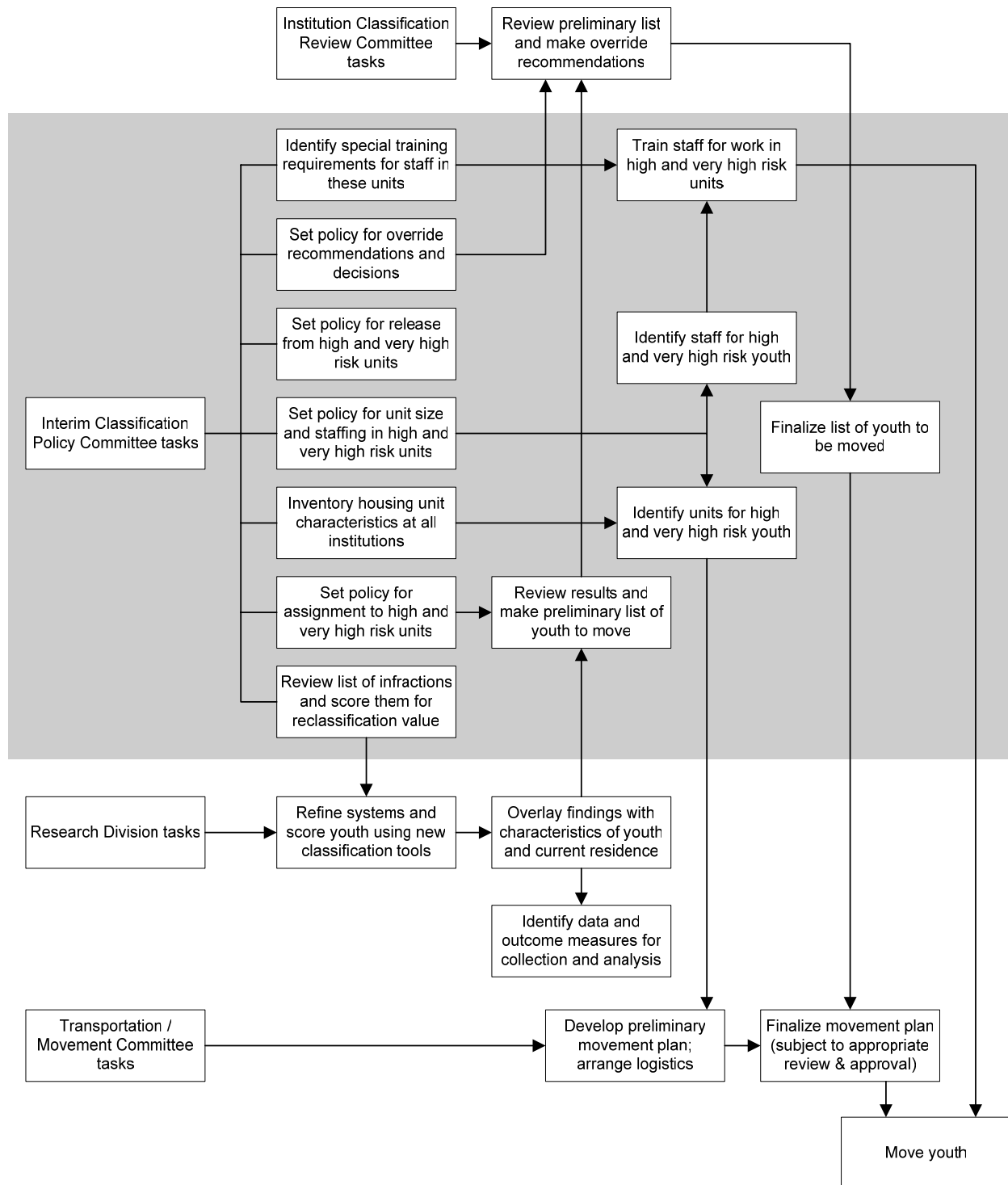
Technical tasks for the IT department include:

- Create a web-based version of the institutional risk classification tool, including incorporation of data needed for outcome measures and evaluation of program effectiveness
- Prepare training materials and provide training
- Support and expand the system

The following chart illustrates this process.



## IMPLEMENTATION OF INTERIM CLASSIFICATION PLAN SEQUENCE OF EVENTS



### **Managing Youth with High Institutional Risk**

As the recent experience of Chaderjian indicates, reducing housing unit size can, by itself, result in significant reductions in youth-on-youth and youth-on-staff violence. However, the youth in the units at Chaderjian are not all high risk. Even with smaller units, if all they contain is youth with the highest risk of violence and serious misconduct, they will become nothing but long-term lockdown units unless more staff are added and they are trained and supervised appropriately.

### **Staffing Levels**

The Safety and Welfare planning team endorses the staffing plan the DJJ has proposed for the Behavior Treatment Program. This level of staffing, along with appropriate training and direction, will, in time, make these units effective treatment programs. Except for our modification to include vocational specialists in lieu of teachers as needed, DJJ's proposed staffing for Behavior Treatment Program units is as follows:

- 1 Psychologist
- .5 Treatment Team Supervisor (masters degree required)
- 1 Casework Specialist (masters degree required)
- 1 Senior Youth Correctional Counselor
- 3 Youth Correctional Counselors on 2<sup>nd</sup> Shift
- 4 Youth Correctional Counselors on 3<sup>rd</sup> Shift
- 1 Youth Correctional Officer on 1<sup>st</sup> Shift
- 1 Teacher for every six youth in academic education
- 1 Vocational Specialist for every six youth in vocational education
- 1 Youth Correctional Counselor for each teacher or vocational specialist

Each institution will also have a psychiatrist and a mental health staff for acute care and outpatient mental health treatment.

**Recommendation:** One psychologist for 24 high risk youth with problem behavior is not enough. To provide 1.25 hours of individual therapy each week (as described in the treatment plan for these units) takes 30 hours/week in a unit of this size – a full clinical caseload. This leaves no time for group therapy, case conferences, treatment team meetings, etc. Either the units must be made smaller or a part-time psychologist added to each treatment team.

### **Program**

This staffing plan allows for substantial out-of-cell time for school, vocational training, small groups, one-on-one counseling, recreation, and other approved activities.

In the short run – before full implementation of the Behavior Treatment Program – the guiding principle of these units should be “do no harm.” That is what the proposed initial training in conflict resolution and incident de-escalation techniques is for. Other simple steps may be possible. For example, staff may also be able to implement an incentives program through development of a token economy that rewards improvements in behavior.

In the long run – after full implementation of the Behavior Treatment Program – these units will be busy places with highly structured activities and effective interventions that teach insight and

skills to help youth escape from the behavior patterns that continue to get them into trouble. That program is discussed in Chapter 2, “Improving Outcome for Youth.”

### Further Sub-division

While this will take longer, youth in these units should be further sub-divided and managed in smaller numbers whenever possible. In many cases, this can be done through modification of the housing units. For example, many existing single celled housing units are constructed with two housing wings of 24 or more cells each. Between the wings is a dayroom, showers, offices and central staff supervision post. Since each wing has at least twice as many cells as are needed to house high risk youth, empty cells on each wing can be converted to offices and, by removing walls between cells, small meeting rooms or classrooms can be created. Through use of these spaces and proper scheduling, each wing can be operated more or less autonomously from the other.

Where modification of cells is not possible or sufficient, adding modular buildings for offices and/or meeting spaces and classrooms will be necessary.

### **Where Do the Staff Come From?**

It may be possible to open and temporarily operate one or two housing units for high risk youth by reconfiguring how current physical and staff resources are used. But long-term continuation or further expansion will not be possible.

DJJ has proposed hiring 253 additional PYs to staff 20 new housing units within the first year of implementation. The Safety and Welfare planning team supports this initiative. It will accomplish the first objective of reducing violence and fear in DJJ facilities and begin the implementation of reform.

Bringing this number of staff on line will take time. Hiring cannot begin until funds and authorization are in place. Staff cannot begin work until they have been trained. (The training academy for Youth Correctional Counselors is 16 weeks.) Units cannot open until staff are ready.

Because of this, following legislative authorization, the first new units cannot open in less than five months. That probably means no sooner than early December 2006. No one should expect all of the Behavior Treatment Program units needed to separate out the high risk population to be complete before Spring 2007. This means staffed and up and running – but not with the rehabilitative model fully in place. Staff in the units brought on line before the training curricula and training staff are ready with the new treatment model will have to be rotated through the new training. Since training vacancies must be backfilled, this must be done incrementally.

### **Recalcitrant Youth**

Within the group of very high risk youth there are some who have no intention of engaging in positive programs. Given real alternatives, there are likely not very many of these youth. But DJJ has provided few real alternatives for a long time and such people exist.

Even the best of systems cannot save everyone. Currently, DJJ is saving almost no one. If DJJ is to have a decent chance of transforming itself into a rehabilitative agency it should be acknowledged that some youth currently in the system do not belong there.

Means for removing older, violent, recalcitrant youth from DJJ institutions will require law changes and are beyond the scope of Farrell. This issue is addressed in a separate paper prepared by the Safety and Welfare planning team that is not subject to the settlement agreement.

## STEP 2: CREATING THE CAPACITY FOR CHANGE

Without the capacity to manage reform, reform will not happen. Without the staff, the organizational structure, and appropriate management culture, responding to the crisis of the moment will always take precedent over making new things happen.

### The Problem

In the opinion of the Safety and Welfare planning team:

- California long ago lost its position as a national leader in juvenile justice.
- Over time, the juvenile authority ceased to be a rehabilitative organization and became a miniature version of an adult system. Juvenile corrections became “prisonized”
- Agency leadership and mid-level management largely ceased to participate in national conferences and dialogue. The agency became parochial.
- Years of neglect left the agency with old, inappropriate buildings that long ago outlived their useful lives. Its only new facility is an adult prison.
- Inadequate training have deprived line staff of the tools they need to respond in constructive ways to a youth population increasingly dominated by gang culture and norms.
- Out of necessity, the agency has created a generation of crisis managers instead of managers who execute the vision and mission of the agency's leadership.
- Frequent turnover in leadership – the average tenure for agency directors since 1991 has been two years – has created discontinuity in direction. This has allowed institutions to become Balkanized. Practices are inconsistent and policy not always followed. The recent resignation of the agency Secretary is a case in point.
- Merger of the adult and juvenile systems has – at least for the present – blurred lines of authority and slowed organizational responses. The juvenile authority has far too few staff in headquarters and at its institutions to implement reform.
- Appointment of a new director, while bringing much needed national perspective, severed institutional memory and steepened the learning curve.

In short, DJJ needs significant help to create the capacity for change. That help will have to come from within the California Department of Corrections and Rehabilitation, the Legislature, and from experts outside DJJ.

**Commentary:** None of this should be interpreted as lack of confidence by the Safety and Welfare planning team in the current leadership of DJJ. Deputy Secretary Warner and his key staff understand the nature and magnitude of the problems, they know what a well functioning organization looks like, and they have done a good job in the time available to name the parts and pieces that are needed to reform DJJ as a rehabilitative agency.

### What Makes a Juvenile Correctional Agency Effective?

The administration of multiple institutional systems within an agency cannot be effectively accomplished without:

1. A foundation based on established contemporary standards of care,
2. Approved procedural methodologies, and
3. Checks and balances which establish accountability measured by uniform performance standards whose results are reported to the public.

The core requirements to achieve such a system are:

### Policy Structure

Those states with effective juvenile justice systems are managed through an administrative system of structured policies that are based on contemporary standards of care and practice that are written in support of the agency mission.

These comprehensive and uniform policies are reviewed annually and updated as needed. Policy requires that the institutions and aftercare divisions of the system institute approved practices to carry out the agency policies and that these practices be systematically and uniformly audited. The structured controls that are present in this model are intended to systematically ensure that constitutional standards of care are uniformly achieved, periodically evaluated, well documented, and that mandatory corrective action plans are developed to address deficiencies.

It is generally the responsibility of the local facility or program to write local directives that incorporate the requirements of each policy. The policy establishes definitions that are consistent between all other policies and which are uniformly taught in the training academy and incorporated into curriculums and all documents and forms. These universal definitions are required to be incorporated into the local policies as well.

### Training

Effective juvenile justice management systems incorporate mandatory training standards to provide employees, contractual staff and volunteers with knowledge and skills to implement agency policy through consistent employment of standard practices and protocols. Mandatory training is provided through a system of certified trainers using curriculums that have been approved and established by the agency training authority.

All training in approved practices is competency based. Modifications or additions to training occur based on reviews of performance-based outcome measures and research findings. All individual training is documented for each employee.

Collateral measures of performance are written into employee job descriptions, post orders, and duty requirements and are reflected in systems established for both probationary and annual evaluations of employee performance. Goals are established that relate to performance outcomes and measures that are linked to agency policy and performance objectives.

All training curriculums are approved, all trainers certified, and all standards for employee certification and recertification are approved by the agency's Training Director.

### Quality Assurance

The requirements for conformance to performance standards are embodied in an agency's policies, supported by approved training methods, reflected in staff evaluations, and measured by the incorporation of comprehensive internal audits of all agency practices by quality assurance mechanisms. These audit mechanisms are established for each operational policy and annual reviews are undertaken for both conformance to policy, approved practices, and operational measures of performance.

Critical measures of performance are established for all levels of services and functions. These data serve to guide management decisions that are based on a systematic appraisal of outcome measures for the agency's various component systems, institutions, programs and individuals.

An annual agency audit schedule is produced for all facilities and programs. Audit teams are created from trained audit staff and from other institution's internal auditors. This produces cross fertilization of compliance experience and builds expertise. The institution superintendent is responsible for establishing an internal audit structure to meet the schedule of the agency. He/she is held accountable for the effective management of the audit process locally.

The performance of the institution or program is measured against the audit compliance standards to produce a measure of institutional excellence. Agency goals are incorporated into facility improvement plans. Audit goals are incorporated into all job descriptions and performance reviews. Accountability is shifted to measurable outcomes at every level. Poor managers are removed.

Uniform expectations for the care and treatment of youth cannot be met if everyone is not held to the same standards, trained by the same curriculums and measured by the same methods.

**Recommendation:** A permanent, dedicated audit staff trained in juvenile policies and best practices is needed at the division level within headquarters. Audit staff from within CDCR, or the positions and funding for them, should be designated and trained to work only in the juvenile division of the agency. At least one person at each site should be designated and trained as an internal auditor for the institution.

#### Data Based Management

Critical management information is defined in agency policy and collected systematically by effective juvenile justice management information systems in order to provide agency managers with reports with which to monitor key indicators of a system's performance, identify and respond to emerging issues, and manage more effectively the shifting needs of high-risk populations.

Establishment of comprehensive management information systems is the key component that creates the capacity for effective planning and efficient management of risk.

#### Corrective Action

Where non-compliance is found corrective action is mandated and staff held accountable. Compliance or non-compliance is included in personnel evaluations linked to job performance indicators for both managers and staff.

Corrective Action Plans are written within the time frame agreed to at the external audit exit interview. A re-audit of those areas found in non-compliance is conducted by the Agency Audit Manager following reported compliance by the audited entity or after some maximum time period specified in advance.

Systems are re-built based on compliance with policy requirements supported by certified training and measured by a comprehensive audit process with deficiencies corrected.

### Annual Reporting of Performance Measures and External Oversight

Effective juvenile justice systems issue comprehensive annual reports to the public that provide detailed analysis of their system's performance, including critical indicators of performance, audit findings, and corrective action plans. They are subject to independent review and external oversight by independent authorities which serves to strengthen the agency's credibility and reinforce adherence to standards of care, constitutional practices and commitment to mission. These management mechanisms are supplemented by external reviews by accrediting organizations and licensing boards and through the use of ombudsmen, Inspectors General and other governmental oversight and/or audit commissions that help to establish continuous public accountability.

### **Maintaining Focus on Juvenile Standards of Care and Practice**

California is in a minority, but certainly not alone, in having its juvenile corrections agency administered from within an adult corrections agency.<sup>8</sup> Since state juvenile corrections agencies are always much smaller than state adult corrections agencies, maintaining separation between the two in critical areas is key to maintaining the identity and integrity of the juvenile authority. The issue, of course, is to prevent the juvenile authority from being overwhelmed by the adult authority and thereby be transformed into a smaller version of the adult system.

The experience of other states shows that it is possible to maintain this separation. But California starts with a distinct disadvantage: the challenge is not to prevent the state's juvenile facilities from becoming like adult prisons - that has already happened. The Safety and Welfare planning team has resorted to inventing new words to describe this situation: California's juvenile facilities have been "prisonized." The challenge is not to prevent this, but to transform an operational culture that has been "adultified" into something quite different.

The two areas where an impenetrable firewall needs to be established between the adult side and the juvenile side of the CDCR are in policy and training. Adult policies and juvenile policies are fundamentally different. As policies differ, so too does training. This leads to two key recommendations:

**Recommendation:** DJJ must have dedicated staff for policy development, revision, and interpretation. These staff cannot be policy specialists redirected from the adult side of CDCR. They must be people knowledgeable of contemporary standards of care and practice in juvenile correctional agencies.

**Recommendation:** DJJ must have dedicated staff responsible for developing curricula and training materials consistent with DJJ policies and standards. DJJ must also have its own cadre of trainers whose sole specialty is training for staff working in a juvenile corrections system dedicated to rehabilitation. As with policy specialists, training staff should not be staff redirected from the adult side of CDCR, but specialists who start out with knowledge of juvenile training standards and curricula. DJJ should have its own training facility.

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<sup>8</sup> As of September 2005, 11 states had the juvenile corrections agency as a part of an adult corrections agency: California, Illinois, Indiana, Louisiana, Maine, Minnesota, Montana, North Dakota, South Dakota, West Virginia, and Wisconsin.



## Headquarters Organizational Structure

DJJ does not have a complete administrative team for the purposes of day-to-day management, much less for implementation of major reform. In fact, at the time this was written, DJJ did not have an official table of organization for its headquarters operations.

The absence of a current table of organization is presumably at least partly attributable to the reorganization that integrated the former youth authority within a restructured Department of Corrections and Rehabilitation. While intended to create efficiencies, in the short term, absorption of substantial portions of DJJ administrative functions within a matrix management system appears to have blurred lines of authority and probably reduced timely response to the needs of the juvenile division.

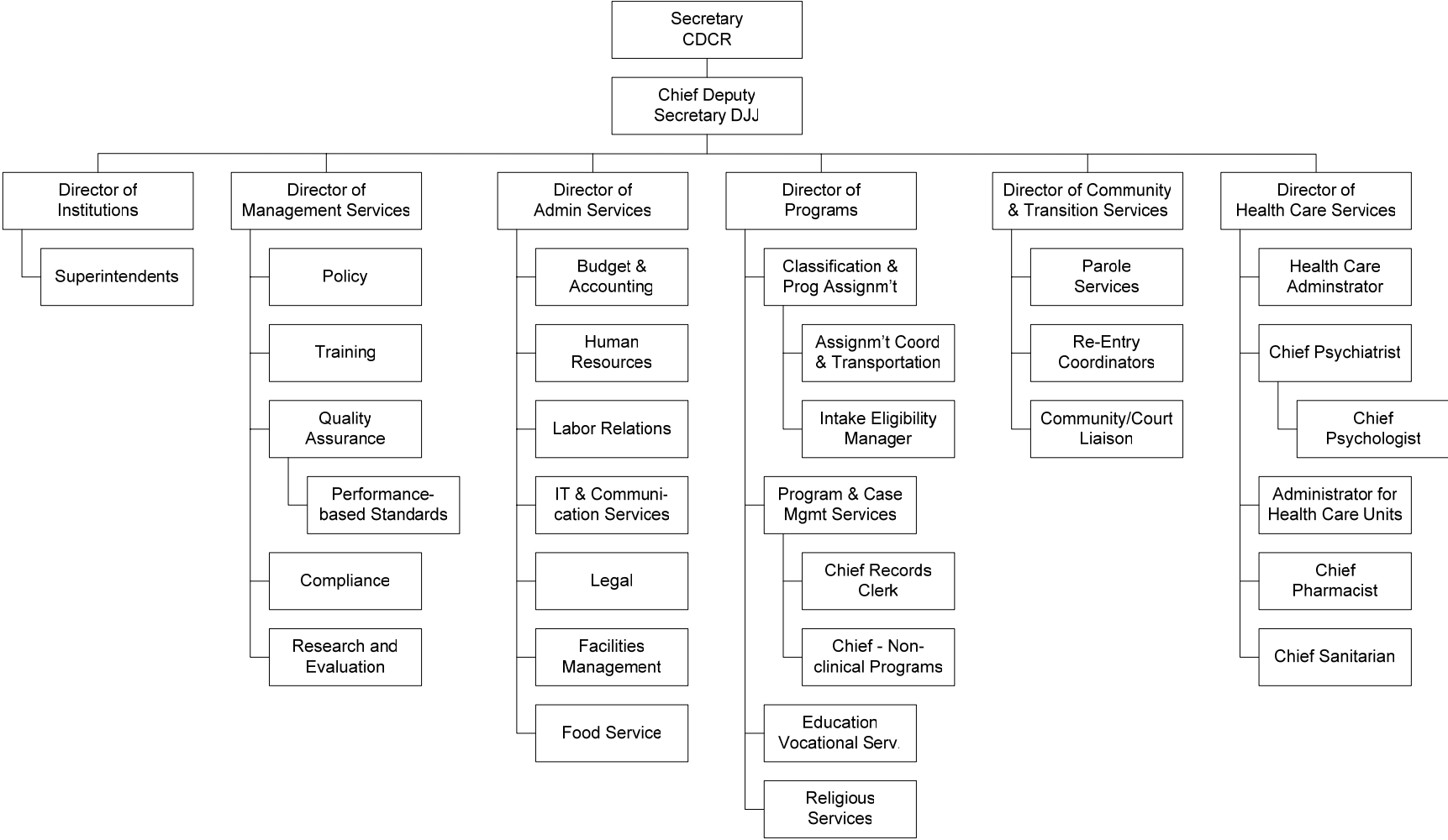
Any management system faces the challenge of allocating resources among competing priorities. In a matrix management system this challenge is further complicated when one part of the organization is much smaller than the other. Furthermore, it is the absorbed entity that experiences the most confusion about lines of authority and about how to have its priorities addressed. The players in the parent organization already know each other and know how to get things done. Establishing working relationships between the leadership of the absorbed agency and the matrix of support elements in the parent organization takes time.

Adding a new Deputy Secretary for DJJ from outside the organization, and having the Secretary of the parent organization resign six months later, does not make the task easier. While appointment of leadership from outside the organization brings much needed national perspective, Deputy Secretary Warner is handicapped by the loss of dedicated resources operating within his chain of command and with the concomitant need to learn how to obtain support from a newly created matrix management system.

In the time available, the Safety and Welfare planning team was unable to determine what resources existed in the youth authority prior to reorganization, where those resources currently reside, or even what resources still operate solely within the juvenile division. Consequently, we are unable to determine how many of the administrative resources needed for effective operation of the juvenile division can be obtained from the parent organization and how much must be created anew. We do, however, have a good idea of the functions that need to be performed at the headquarters level and the organizational structure needed to carry them out. We also know that many of the functions needed for reform – and the staff that go with them – cannot have been transferred to matrix support units in the parent organization because those functions were not being performed within DJJ in the past.

Figure 1, on the following page, identifies headquarters functions and proposes a table of organization for the division. Position and functional titles are for illustration purposes only. The important thing is that all functions be covered and appropriately staffed by knowledgeable people familiar with contemporary standards of care and practices in juvenile correctional systems.

**FIGURE 1: RECOMMENDED TABLE OF ORGANIZATION FOR DJJ HEADQUARTERS OPERATIONS**



With different staffing levels, this organizational structure is appropriate both for day-to-day management and for management of reform. Three recommendations follow from these observations.

**Recommendation:** CDCR should dedicate specific resources from within its matrix support functions for priority assignment to juvenile matters. These staff should report to the appropriate managers within DJJ and be available to work on assignments for the other parts of the department only when not needed by the juvenile division. In areas where knowledge of contemporary standards of care and practice for juvenile correctional systems is critical and expertise is not available within CDCR (in particular policy development, program development, and training) hiring authority and funding should be transferred to the juvenile division.

**Recommendation:** Vacancies within the organizational structure needed for effective management of the juvenile division must be filled. The Safety and Welfare planning team cannot determine to what extent any of these vacancies can be filled by redirecting staff from within CDCR or through transfer of hiring authority and funding to the juvenile division. It may be that none of them can. To the extent that sufficient or appropriate resources are not available within the department, legislative authorization and funding will be required.

**Recommendation:** Staff needed to implement and manage reform are new to DJJ and consequently not part of staff that can be redirected from other parts of CDCR. In addition, virtually all of these positions require knowledge of contemporary juvenile standards of care and practice. These positions (described below) will require authorization and funding by the legislature.

### **Resources Needed to Implement and Manage Reform**

In its November 2005 Safety and Welfare Plan and the accompanying Budget Change Proposal, DJJ identifies four components needed to implement and manage reform. These include:

- A team of four associate directors along with 12 support staff who will be responsible for program development and implementation
- A team of five staff supported by one office technician for compliance matters. This team would operate for five years.
- A team of five staff supported by one office technician to assist with transition during the first three years of reform. This group will primarily focus on matters relating to cultural change within the organization – i.e. “de-prisonizing” DJJ’s institutions.
- A team of 16 staff to provide initial and on-going training in new policies and practices for rehabilitative interventions and management of youth by contemporary standards of care. These staff will also provide on-going consultation and quality assurance for these new practices.

In addition, DJJ has committed to implementing Performance-based Standards throughout its institutions. Performance-based Standards (discussed below) will be an important component in the management of reform as well as an important tool for on-going management of the division.

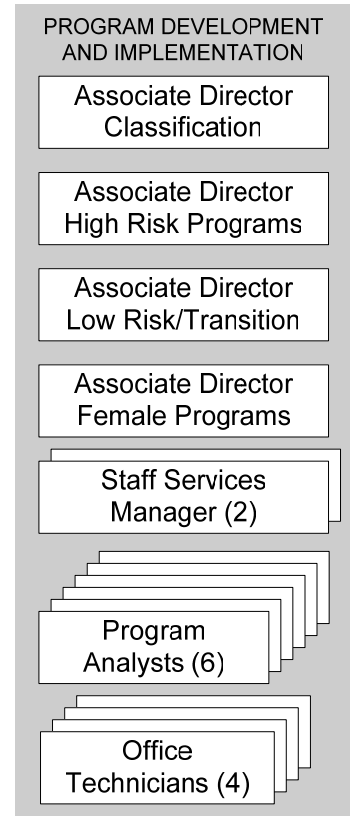
### Program Development and Implementation

Failure to develop, implement, and monitor programs is at the heart of the Farrell lawsuit. DJJ has proposed creation of a 16 member program development and implementation group as a critical component in the effort to move reform forward. This group would be led by four new senior administrators each of whom is responsible for one of the following areas:

- Female Offender Programs
- Classification
- Programs for High Risk Youth
- Programs for Lower Risk Youth and Transition Services

Under the DJJ proposal, these senior administrators are supported by two staff services managers, six program analysts and four clerical and support services staff as illustrated in the figure to the right. DJJ reports that none of these positions existed prior to the reorganization so there are no positions in CDCR to redirect.

**Recommendation:** the Safety and Welfare planning team fully supports creation of such a team at the level of staffing proposed by DJJ. In the organizational structure proposed above, the Program Development and Implementation team would report to the Director of Management Services.

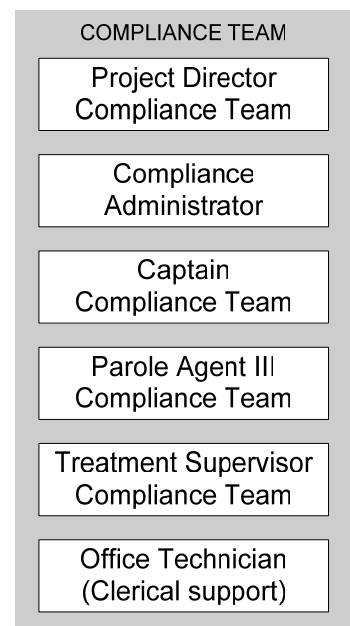


### Temporary Compliance Team

DJJ reports that it currently has one position dedicated specifically to compliance with the Farrell lawsuit. As the reform plan is implemented, the need to collect and analyze data for purposes of documenting and reporting to the court and others will substantially increase. DJJ notes that similar lawsuits on the adult side of the CDCR have resulted in compliance teams of several people at each facility. The compliance team proposed by DJJ for the Farrell lawsuit is much smaller than that.

DJJ's proposal is to hire a Remedial Project Director and five additional staff, one of whom is an office technician. The proposed composition of the team is as illustrated in the accompanying figure.

The Project Director would be responsible for statewide court compliance and would represent the division in remedial project matters with the court master, plaintiff's attorneys, CDCR executives, legislators and their staffs, other state officials, and local and state stakeholders.



The compliance team would operate for five years. This covers the four years planned for implementation plus one additional year to address outstanding issues and redress remaining problems.

If DJJ had competent and comprehensive management information and reporting systems (which it does not), the work of the compliance team could be substantially simplified and the size of the team reduced. If quality management information and reporting systems can be developed before reforms are fully implemented, the workload of this team should be reviewed and staffing adjusted as indicated.

**Recommendation:** the Safety and Welfare planning team fully supports this proposal, noting that all compliance staff may not be needed for five years if appropriate information and reporting systems are in place. In the organizational structure proposed above, the compliance team would report to the Director of Management Services.

#### Temporary Transition Team

DJJ proposes creation of a dedicated transition team that would operate for the first 36 months of plan implementation. The team would operate at full strength (six staff as illustrated in the figure to the right) for the first two years. Three staff would continue for one additional year. The primary focus of this team would be assisting with organizational development and cultural change within the division and its institutions.

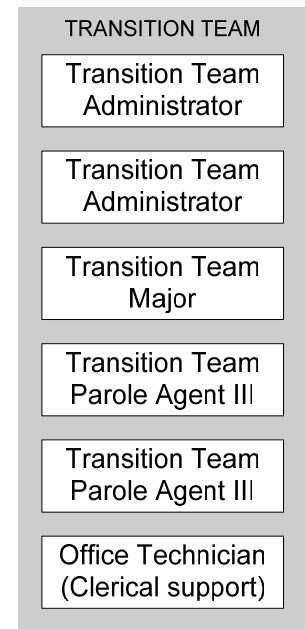
In addition to its primary function, DJJ indicates that this team will assist in the development of plans, contracting with experts, identifying action steps, and development of training curricula and materials. They may also help to develop treatment programs and facilitate community outreach.

The Safety and Welfare planning team has repeatedly noted that DJJ's facilities are operated on an adult model and that the organizational culture reflects that orientation. In addition, while there are many staff who would like to operate in a different fashion and help troubled youth turn their lives around, the division has become inbred and parochial in its vision. Knowledge and understanding of contemporary standards of care and practice is not well distributed throughout the division. Indeed, cultural change may be the single greatest challenge in reforming California's juvenile correctional system to a rehabilitative model.

**Recommendation:** the Safety and Welfare planning team fully supports this proposal. The people hired to fill these positions will have to come from within the organization. They must be strong advocates for the rehabilitative model and be trusted and respected by their peers and subordinates. In the organizational structure proposed above, the Transition team would report to the Director of Institutions.

#### Training and Quality Assurance

DJJ proposes to hire 18 trainers to provide training for Strategies for Juvenile Supervision (SJS), Client Management Classification (CMC), Risk/Needs Assessment, Motivational Interviewing,



and Individual Change and Accountability Plan development. Eight of these positions would specialize in SJS and CMC training. The remaining ten would provide training in the other areas listed.

Additional training needs are to be identified through a training needs assessment being conducted by Chico State University.

In addition to training, DJJ proposes to use these staff to conduct quality assurance audits, monitoring, and performance support. Trainers would provide follow-up training as determined by monitoring and audits.

A system of internal and external audits was described earlier in this section (see page 20). We believe that that system should be followed in auditing all aspects of system performance. Consequently, while the Safety and Welfare planning team supports the need for trainers, we do not believe that the same people should be responsible for auditing their own performance. This does not mean that the trainers should not act as monitors, consultants, coaches, and resources for helping construct and implement corrective action plans in their areas of expertise.

DJJ correctly notes that training needs will be substantial. This will be particularly true during the four years of implementation of reform. They further note in their workload analysis for trainers (see BCP, pages 89 and 93) that the quality assurance component of their work is a relatively small part of the overall job.<sup>9</sup> Furthermore, in other parts of this document the Safety and Welfare planning team identify other training requirements not included in those listed for the positions proposed here by DJJ.

**Recommendation:** the Safety and Welfare planning team endorses DJJ's plan to hire 18 trainers but believes they should not conduct quality assurance audits. Since it may be the case that the workload of this group will diminish as the implementation of reform nears completion, their workload should be monitored over time and staffing levels adjusted accordingly.

### Performance-based Standards

The effective management of risk is the prerequisite to establishing any form of effective treatment. For environments that are essentially out of control, the capability for analysis is a prerequisite to establishing workable interventions, new policies and practices and improved measures of outcomes. Performance-based Standards (PbS) is a nationally recognized self-improvement and accountability system used in 27 states and the District of Columbia that provides that analysis. DJJ has committed to implement PbS in all of its institutions.

PbS standards offer DJJ a method for periodic sampling of outcome results that are linked to expected practices. There are three primary domains that are sampled from incident reporting characteristics. They are measures of safety, order, and security.

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<sup>9</sup> DJJ estimates that quality assurance will be some fraction of 450 hours per year. Also included in this 450 hours is monitoring, performance support, and follow-up training.

These outcome measures are used in conjunction with other PbS measures to produce reports reflective of the conditions of confinement at each facility. The system has the capacity to do incident mapping and custom reporting based on these data.

Recent work related to the eight years of reported data in the PbS database provides evidence of valid correlations between standards and outcome measures. This analysis confirms the validity of the relationship between PbS standards, expected practices and positive outcomes.

PbS provides standard implementation services and technical assistance for the first 12 months while an agency begins to implement the program. Ongoing quality assurance is also provided.

PbS requires data collection and data entry at each institution as well as state-wide oversight. The program describes the resources needed for implementation and ongoing operation. Consistent with those requirements, DJJ is proposing to hire a senior Staff Services Manager and ten program analysts. The Staff Services Manager is responsible for oversight and statewide coordination. The program analysts operate as Site Coordinators for PbS. The number of site coordinators at each site is based on the projected institution population and the number of incidents per year that require detailed review and analysis.

**Recommendation:** the Safety and Welfare planning team fully supports the initiative proposed by DJJ to implement Performance-based Standards at all its institutions.

### **Management Information Systems**

DJJ's Safety and Welfare Plan includes only passing reference to the need to have a strong management information system to track performance measures and outcomes. The Budget Change Proposal for implementing the Safety and Welfare Plan does not include any funding for increasing information technology capacity or functionality.

As noted earlier in the discussion of the core requirements for an effective juvenile correctional system, "establishment of comprehensive management information systems is the key component that creates the capacity for effective planning and efficient management of risk." (See page 21.) The same is true for implementation and management of reform.

A comprehensive management information system has the capability of providing operational data and reports at central office and at facility and program levels to support:

- The administration of population management
  1. Intake
  2. Orientation, Rights and Responsibilities
  3. Rejection and diversion
  4. Assessment/Classification/Placement/Reassessment
  5. Assignment based on service and custody requirements
  6. Reclassification, re-assignment and transfers
  7. Parole violator reclassification
  8. Transfers to transition centers
  9. Transfers to other custody
- Management of custody and security operations
  1. Incident management and crisis prevention and response

2. Lockdowns
3. Investigations and prosecutions
4. Offender management, gang intelligence and interdiction
- Administration of case-management and planning
  1. Individual case planning and establishment of service levels
  2. Program day scheduling and length of stay service scheduling
  3. Program enrollments, goals, and outcomes
  4. Reintegration planning and aftercare
  5. Parole
  6. Aftercare outcomes and tracking
- Management of programming enrollment, treatment services utilization, and outcomes
  1. Core Treatment Programs
  2. Behavior Treatment Programs
  3. Counseling
  4. Mental health
  5. Substance abuse
  6. Education
  7. Vocational and Work Training
  8. Health Care
  9. Youth work assignments
  10. Behavioral management and modification
  11. Gang interdiction
  12. Sex offender/victimization
  13. Parenting and family
- Monitoring and managing justice and disciplinary practices and outcomes
- Use of Force (UOF)
- Use of Graduated Sanctions/Disciplinary System and Positive Incentives
- Grievance System
- Access to Courts
- Access to Religious Services
- Management of audits and data quality control
- Compliance/Data Management/Evaluation
- Management of training and staff development
- Policy compliance tracking and audit outcome results
- Research; management and program effectiveness
- Short-term planning for corrective action
- Strategic planning for five years with annual updates
- Budget data, expenditure analysis, and cost benefit outcomes
- Planning for efficient repair and maintenance and Capital construction
- Annual Reports of outcomes and costs

Management information reports should provide lead indicators on key quality assurance measures both to enable managers to make changes before significant deterioration of performance and to flag issues for auditing.



To the maximum extent possible, data collection and reporting systems should be developed concurrently with reform planning and implementation. MIS staff should participate in planning discussions.

### **Research**

The agency has a commitment to establishment of outcome measures for its managerial functions, conditions of confinement, and programmatic outcomes. Guidance for agency planning must come from the development of comprehensive data sets that can provide managers with periodic pictures of performance and systematic movement towards the achievement of goals and objective. Integration of measures to ascertain the extent to which the agency and its managers are achieving these goals becomes a critical function of applied research and analysis.

It is not isolated research that is needed, but practical methods for ensuring that the data and measurements are kept that integrate management requirements, programming requirements and operational requirements to measure outcomes, guide innovative solutions, and provide public information related to progress and success.

The research manager must be a critical advisor in the development of effective measures and reporting processes and establishment of standards for data quality and validity.

### **Promoting Continuity in Professional Leadership**

During the first 38 years of the existence of the California Youth Authority there were four directors with an average tenure of 9.5 years. In the following 24 years there have been 11. Since 1991 the average tenure of a director has been just over two years.

This rapid change in agency leadership means that directors have a short time to learn the agency and a short time to make any change. Staff see directors come and go. New ideas flower and die. The agency remains the same. This is not what is needed to make changes like those DJJ has committed to make.

Creating a way to attract and keep professional leadership is a challenge in most states. When positions become politicized it becomes even more difficult.

A mechanism employed by a few states has successfully addressed this issue. In those states there is a policy making board appointed by the governor and approved by the legislature that hires and fires the director of the youth authority. Board members have overlapping terms exceeding the duration of a single gubernatorial term. The Safety and Welfare planning team does not specifically recommend this approach for California, but encourages creative thinking to promote greater continuity in professional leadership in DJJ.

### **Creating Capacity for Change at DJJ Institutions**

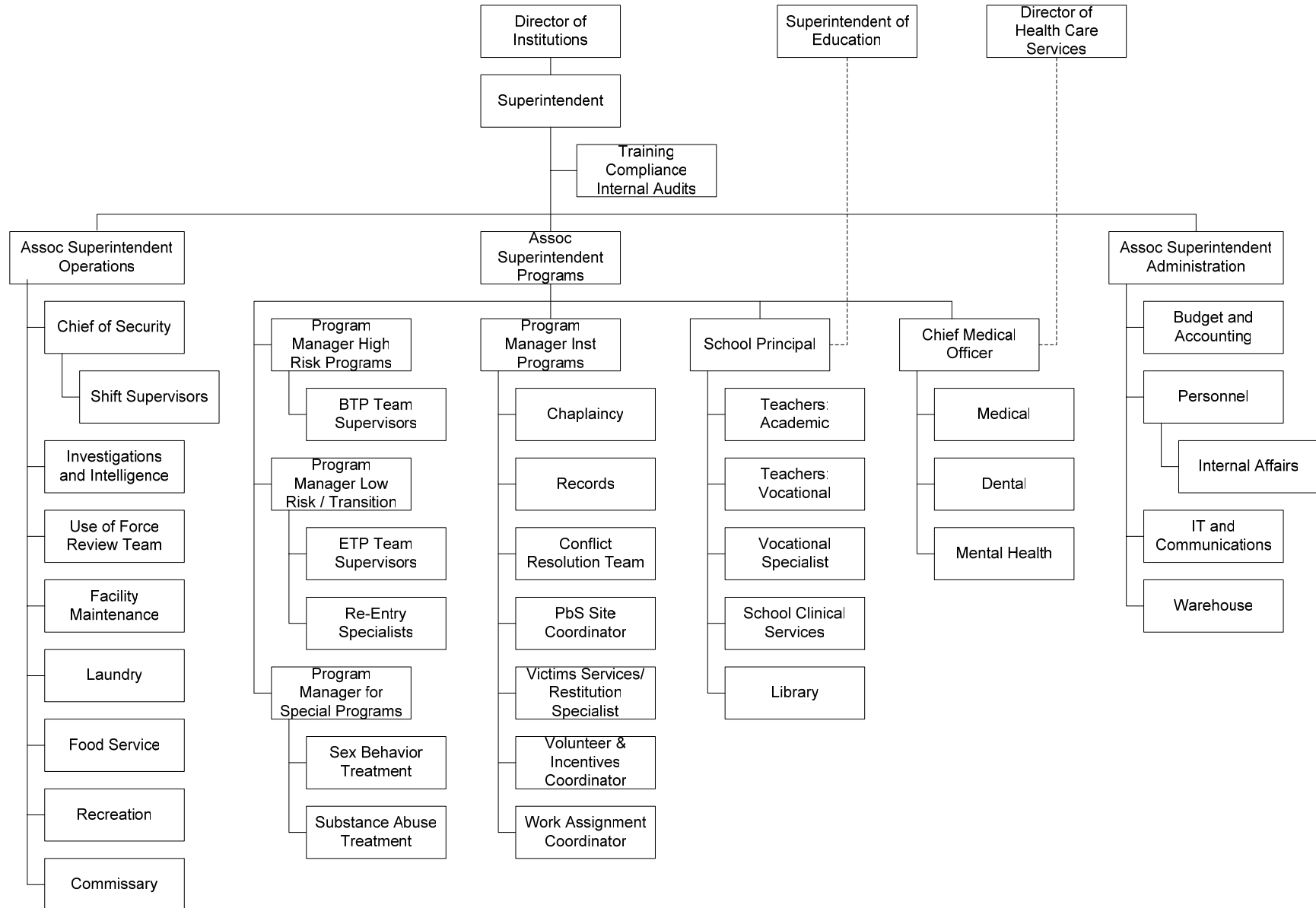
Similar changes to those described for headquarters' operations need to be made at DJJ institutions. Those changes should reflect the core requirements for effective management outlined at the beginning of this chapter.

In addition to changes in the treatment teams that DJJ proposes to implement, there are new positions designated for each institution. These include:

- A Program Manager responsible for programs for high-risk youth
- A Program Manager responsible for programs for low risk and re-entry youth
- A Volunteer Coordinator/Positive Incentives Coordinator
- A Vocational Specialist to provide vocational and career counseling and coordination with parole and re-entry specialists (one site already has this position)
- One re-entry specialist for every two housing units
- A Victim Services/Restitution Specialist (some sites already have this position)
- A four to eight person conflict resolution team (size based on institutional population)
- A training officer with half-time office tech support (some sites already have this position)

Figure 2 illustrates a generic table of organization that incorporates the new elements proposed by DJJ in a logical fashion.

**FIGURE 2: RECOMMENDED GENERIC TABLE OF ORGANIZATION FOR INSTITUTIONS**



Some of the new positions proposed by DJJ are implemented over time. The re-entry specialists, trainers, and vocational specialists are phased in beginning in FY 07/08. The volunteer/positive incentives coordinator and victim services/restitution specialist start at a few sites in the first year and are expanded to all institutions the next. The program managers are phased in as each institution begins conversion to the new rehabilitative model.

Our recommended table of organization for institutions includes three associate superintendents. The actual titles used for these and other positions/functions are for illustration purposes only. Whatever titles are used, we recommend that they be made consistent across the entire division.

In addition to the new positions identified by DJJ, we recommend establishment of a Work Assignment Coordinator at each institution. This position would seek out and develop work assignments for youth throughout the institution. The position would also monitor and assure that the maximum number of youth are attending vocational training and Free Venture programs. The position would coordinate and develop external job assignments, work experience programs and job furlough programs.

Many of the positions in the table of organization already exist at some or all of the institutions. We differ in our recommendation from that of DJJ in that we think that three (not two) program managers will be needed at all institutions and that a fourth will be needed at those institutions that have special programs (such as residential sexual behavior treatment or residential substance abuse treatment). The third program manager will be responsible for institution-wide programs and program services such as chaplaincy, the victims' services/restitution specialists, the volunteer/positive incentives coordinator, records, the site manager for performance-based standards, and the conflict resolution team.

The Safety and Welfare planning team was not able to determine to what extent – if any – the additional program managers reflect changes in job descriptions for managers already at the institutions. To the extent that they do not, we recommend that the legislature authorize and fund these positions.

Some of the positions requested by DJJ (such as volunteer coordinators, trainers, and vocational specialists) are positions that any institution of the size operated by DJJ ought to have now – let alone in conjunction with conversion to a rehabilitative model.

**Recommendation:** the Safety and Welfare planning team supports DJJ's plan for additional management and central support staff at its institutions. We also believe that a Work Assignment Coordinator position and two additional Program Manager positions should be created at each institution. If the additional positions identified by the Safety and Welfare planning team cannot be redirected from existing resources, we recommend that they be added to DJJ's request for additional positions and funding.

**Recommendation:** Existing resources in information technology dedicated to DJJ are insufficient to meet the MIS planning, design, and implementation needs for system reform. To the maximum extent possible, DJJ should acquire existing systems that can be tailored to their own needs. DJJ should request additional funding to hire outside experts to help identify such systems and to participate in planning and design of new data collections and reporting systems.

## **MOVING FORWARD**

No one should underestimate the difficulty of implementing such sweeping reform in a system as troubled as this. The task is do-able, but it will take long-term commitment and cooperation between parties who don't always agree. Players will change. Mistakes will be made. The process will take years. The end result, however, will be worth it. Lives will be changed and futures restored. Communities will be safer and prisons less full.

### **Moving from Harm Reduction to Rehabilitation**

The recommendation of the Safety and Welfare planning team is to move as quickly as possible to bring populations levels down in housing units for youth with high risk of institutional violence. Smaller, better staffed units for high risk youth – even before the new treatment model is in place – will allow order to be restored within the units they leave behind and the units to which they go.

This step is an interim, harm reduction, step. Its sole intent is to reduce the levels of violence and fear in DJJ institutions so that better things can happen. While this step is being taken, elsewhere in the system the ground is being laid for treatment reform: lines of authority are clarified, management staffing enriched, policies rewritten, training standards adopted, training materials prepared, trainers trained.

New units will be opened in three or four waves – the pace governed by hiring and training requirements. By the time the third wave starts the new treatment model should be ready. From that time forward, as new units are opened, rehabilitation begins.

When the treatment model is ready, staff in units already opened will rotate through training not available before. DJJ will be on the road to treatment reform.

### **Continue Expansion of Reform**

The efforts of the Safety and Welfare planning team have concentrated on getting reform off the ground and building the inertia to continue. This is partly from necessity (the time being short) and partly by design. The first year builds most of the pieces from which all future change is constructed.

There are six major tracks that define the activities of the first year:

- Reducing violence and fear
- Creating the capacity for change
- Laying the foundation for treatment reform
- Moving beyond reform of institutions
- Continuing to plan
- Facilities planning and development

While these tracks are convenient for consolidating highly related tasks, there is interaction between tracks and between tasks within tracks. For example, training materials for new programs can't be developed before the program design is set and its components defined. Case managers and casework specialists can't be hired before the case manager series is approved by

the State Personnel Board and the Department of Personnel Administration. The interaction of these tasks and tracks will affect the pace of reform. Some things just can't be started until other things are done.

The major tasks relating to each of these tracks are outlined in the sections below.

#### Track 1: Reducing violence and fear

The major first year tasks for this track are:

1. Implement Interim Classification Plan
  - a. Complete analysis of current population
  - b. Develop a movement plan
  - c. Identify and train staff for assignment to new units
  - d. Prepare units for new program
  - e. Move youth
2. Recruit and hire YCCs and YCOs
  - a. Group 1 (80 to 100 positions)
  - b. Group 2 (80 to 100 positions)
  - c. Group 3 (80 to 100 positions)
3. Provide academy training
  - a. Group 1 (16 weeks)
  - b. Group 2 (16 weeks)
  - c. Group 3 (16 weeks)
4. Obtain and provide training in crisis intervention, de-escalation, and conflict resolution skills
  - a. Group 1
  - b. Group 2
  - c. (Group 3 will receive training in all new program skills)
5. Open housing units
  - a. 9 BTPs with group 1 staff
  - b. 5 to 6 ETUs with group 2 staff
  - c. 5 to 6 ETUs with group 3 staff
6. Provide training in all new program skills to group 1 and group 2 staff

#### Track 2: Creating the capacity for change

Creating the capacity for change takes place at both the division and institution level. The major first year tasks at headquarters are:

1. Clarify lines of authority and solidify the organization chart
2. Hire Program Administrators and support staff
  - a. Classification Administrator  
Develop policies and procedures and oversee implementation of new assessment and classification tools and processes; develop criteria for entrance and exit requirement for all housing unit types; chair the multi-disciplinary team for classification and housing assignment
  - b. High risk Administrator  
Oversee the design and implementation of the Behavior Treatment Program and other programs for high risk youth

- c. Low risk and transition Administrator  
Oversee the design and implementation of programs for medium and low risk youth and for transition services
  - d. Female Offender Administrator  
Develop and implement plan to contract with local sites/vendors for female youth  
Provide quality assurance oversight of programs and services for females
- 3. Hire Compliance Team staff
  - a. Develop reporting protocols and formats
  - b. Train staff at institutions on data collection and reporting
- 4. Hire Transition Team staff
  - a. Work with superintendents and other institutional managers and staff to facilitate transition to the new treatment model
- 5. Develop Audit Team
  - a. Develop procedures and schedules for auditing all agencies policies
- 6. Hire statewide coordinator for Performance-based Standards
  - a. Coordinate implementation of Performance-based Standards
- 7. Hire juvenile justice MIS consultant to
  - a. Identify needs
  - b. Create report formats
  - c. Design user interfaces
- 8. Implement WIN Exchange
  - a. Provide training
  - b. Develop query and reporting capabilities
- 9. Create/obtain other MIS infrastructure as necessary
- 10. Confer with Unions at multiple points

Major first year tasks at the institutions are:

- 1. Consistent with agency policy, clarify lines of authority and solidify the organization chart
- 2. Organize and implement disciplinary hearing review teams
- 3. Rewrite local policies and procedures to conform to division policy
- 4. Designate staff to act as internal auditors; develop an internal auditing schedule for all operations
- 5. Hire and train Performance-based Standards site coordinators
- 6. Hire, train and implement conflict resolution teams
- 7. Oversee development of an institutional “program service day” schedule
- 8. Hire vocational specialists and oversee expansion of vocational programs

### Track 3: Laying the foundation for treatment reform

Major first year tasks for this track are:

- 1. Hire subject matter experts to help develop program designs and content
- 2. Hire SJS/CMC, Risk/Needs and ICAP trainers
- 3. Obtain or create training materials and train trainers
  - a. Integrated Treatment Model
  - b. SJS/CMC
  - c. Risk Needs

- d. ICAP
- e. Motivational interviewing
- f. Interactive Journaling (new curriculum)
- g. Normative Culture
- 4. Provide training to new hires
- 5. Provide training to current staff
- 6. Establish new case manager series
  - a. Develop training material for case manager series
  - b. Obtain DPA and SPB approval
  - c. Recruit, hire and train case managers and casework specialists
- 7. Develop training materials for other treatment team members
- 8. Recruit, hire and train other treatment team members
- 9. Implement treatment model

#### Track 4: Moving beyond reform of institutions

The Safety and Welfare Plan deals primary with reform within DJJ institutions. Some aspects of DJJ's reform plan begin to move beyond institutions. The first year tasks for this track are:

- 1. Collaborate on acceptance/rejection criteria
- 2. Hire Community/Court Liaison staff

The Safety and Welfare planning team also recommends that DJJ create – in collaboration with counties and other stakeholders – a reform plan for parole, aftercare services, and transition services between local detention halls and probation services and state institutions. We do not, however, recommend that this be started in the first year. Work in this area should wait while reform goes forward in the institutions and while collaborative relationships are developed and nurtured between the state and local stakeholders.

#### Track 5: Continuing to plan

Planning for implementation of reform is incomplete and circumstances or new insight will cause some plans already made to be revised. In the short term, DJJ must make a detailed plan and budget request for the second year of reform implementation. Plans carrying reform to completion should be refined and revised as necessary.

#### Track 6: Facilities Planning and Development

Winston Churchill once said, "First we shape our buildings, then they shape us." While good things can happen in bad places, the effort is harder and the results less certain. This is the case with DJJ and the buildings it uses. As long it inhabits obsolete old buildings, the buildings will compromise efforts at reform. Even Chaderjian, with its more modern design, is inappropriate for youth and a rehabilitative model.

The first step in replacement of these old buildings is to conduct a 10-year master plan. The master plan should assess existing facilities and identify infrastructure that can be reused. It should set standards for new prototypes to address different missions. One prototype should be for younger residents and have traditional school education as its primary focus. Another prototype should be for older youth and primarily focus on vocational/work training and institutional and free venture jobs. Concepts should be developed for small, regionalized transition facilities for youth leaving institutions or in danger of revocation.



The plan should analyze data on the incoming population and forecast needs by gender, age, and special needs.

The plan should include a schedule and estimated costs for the phased replacement of all housing units and most institutions. When no longer needed, Chaderjian should be turned over to the adult system to be used in the way its original design intended.

In the short term, capital planning and development should continue with plans to modify existing buildings and install modular buildings for offices, classrooms, and group rooms as required by the new treatment model.

## Chapter 3 IMPROVING OUTCOMES FOR YOUTH

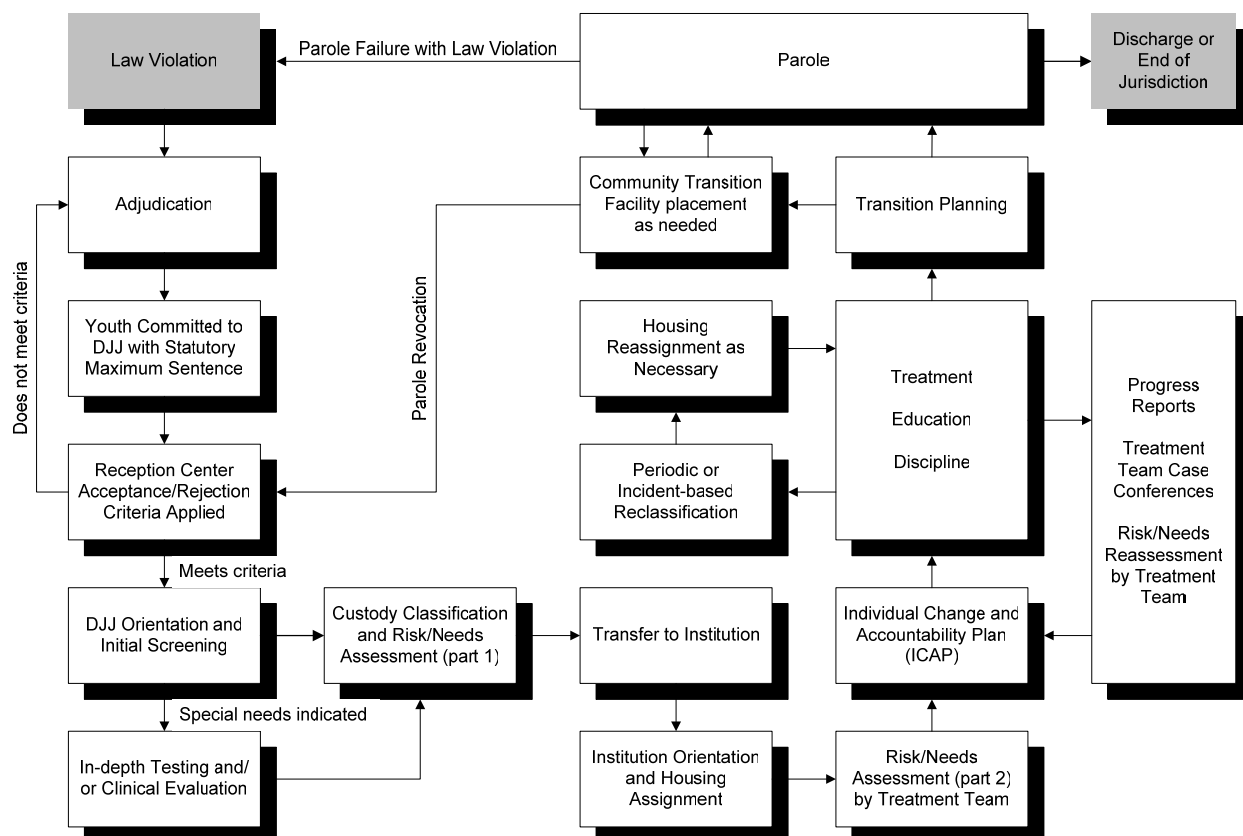
DJJ is to be commended for identifying the components and approaches needed to provide high quality screening, evaluation, treatment, and transition services for the youth committed to its care. The division's Safety and Welfare Plan and associated Budget Change Proposal make it clear that senior management and the planners involved in the planning and budgeting have a good understanding of the principles and concepts needed to reform the system into one with an effective rehabilitative focus.

While the parts and pieces are generally all in place, the Safety and Welfare planning team believes the plan could benefit from a clearly articulated theory or philosophy of treatment that unites these elements into a coherent whole. Consequently, after a brief overview of the components of a rehabilitative model, this is the starting place for our recommendations for improving outcomes for youth.

### SYSTEM COMPONENTS

Figure 1 shows how a youth committed to DJJ would move through a system that incorporates the elements of a rehabilitative model. With the exception of community transition facilities, all of these elements either currently exist or have been proposed by DJJ in its Safety and Welfare plan.

**FIGURE 1: A REHABILITATIVE MODEL FOR DJJ**



A strict interpretation of the requirements of the stipulated agreement in the Farrell lawsuit would terminate this process with transition/reintegration planning. Consequently, this document concentrates on those issues clearly within Farrell and only briefly discusses community transition facilities and parole. A comprehensive juvenile justice reform plan would look at all parts of the system – including probation, juvenile detention, and the relationship between the state and local government. Those issues are beyond the scope of Farrell and of this report.

The key components of a reformed DJJ system are:

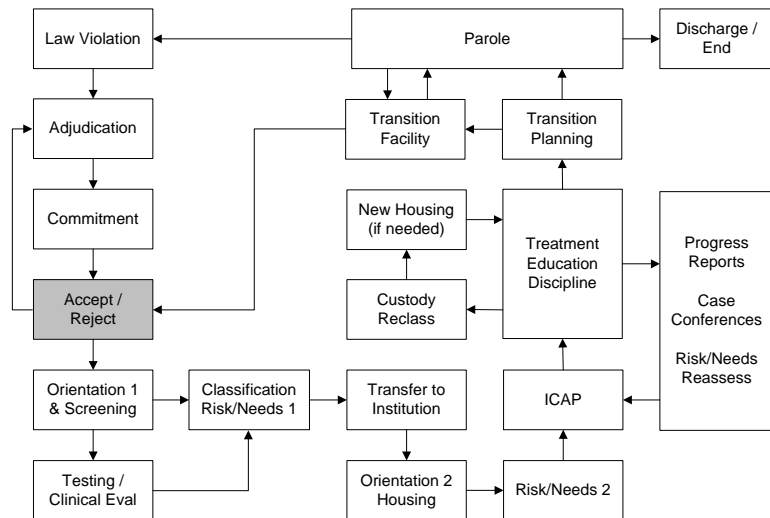
- Acceptance/rejection criteria and their application
- Initial screening/evaluation and assignment to a living unit
- Development of an Individual Change and Accountability Plan
- Treatment and case management
- Periodic reassessment
- Transition services and aftercare

The following material discusses each of these components. In addition, we propose an overarching treatment model that unites these elements into a coherent whole.

### Acceptance/Rejection Criteria

Under state law, DJJ “shall accept a person committed to it ... if it believes that the person can be materially benefited by its reformatory and educational discipline, and if it has adequate facilities to provide that care.”<sup>10</sup>

Both state and local governmental entities in California have a great interest in how it is determined if a person can material benefit from DJJ’s “reformatory and educational discipline.” Consequently, DJJ committed in its Safety and Welfare Plan to work with state and local partners to develop formal rejection criteria and a process to address this issue.



In its discussion of potential rejection criteria, DJJ expressed particular interest in “those youthful offenders with complex medical conditions, persistent and serious mental health care needs and/or developmental disabilities, who cannot materially benefit from a commitment to DJJ.”

Consistent with its November 2005 plan, DJJ has worked with state and local partners on this issue but it did not meet its self-imposed deadline of March 1, 2006 to finalize the criteria.

<sup>10</sup> California Welfare and Institutions Code 1731.5(b)

The Safety and Welfare planning team has heard from Chiefs of Probation and other stakeholders that it is precisely those youth who have the most difficult problems for which they most need the state's help. The question of whether these youth should be committed to DJJ to receive highly specialized services, or whether some other state entity should provide the services, is far beyond the scope of Farrell or the ability of the Safety and Welfare planning team to resolve.

We further note that DJJ's ability to provide more complex medical and mental health services will improve when and if the recommendations of the Safety and Welfare Plan, the Health Care Services Remedial Plan, and the Mental Health Remedial Plan are implemented.

**Recommendation:** DJJ should continue to work with state and local partners to develop rejection criteria that are mutually acceptable. The Safety and Welfare planning team supports DJJ's proposal to add dedicated Community/Court Liaison positions who, among other things, will assist counties in identifying alternative strategies for youthful offenders whom DJJ rejects.

## **AN INTEGRATED APPROACH TO ASSESSMENT AND TREATMENT**

Several states have well integrated comprehensive treatment models that adhere to a core treatment philosophy – among them Washington, Texas, and Colorado – all states visited by both parties in the Farrell lawsuit. Because the research literature and experience support it, these programs base their treatment philosophy and interventions on cognitive-behavior treatment. Consistent with the literature and experience of these and other states, DJJ has committed to implementing a rehabilitation program based on this approach.

While the particulars may differ, because they are based on the same treatment approach, the concepts behind the treatment model in each of these states are more or less the same. As the agency with the most fully documented model, we use the Integrated Treatment Model developed by the Washington State Juvenile Rehabilitation Administration to illustrate these concepts. While it is not the only or clearly best model, it is among the very best in the nation. It conceptually unites evidence-based programs in a coherent, clearly articulated way. It is open-ended, in that it can embrace any evidence-based intervention consistent with a cognitive-behavior model. Because of existing documentation, the model is fully replicable and has existing materials – including training materials and an implementation plan – that could be modified over time to tailor it to the specific or changing needs of the California juvenile corrections system. DJJ would not have to reinvent the wheel if it used the JRA Integrated Treatment Model as a starting point for implementation of reform.

### Treatment is Pervasive and Universal

The Integrated Treatment Model provides the central guiding vision uniting screening, assessment, case planning, treatment, transition, and aftercare. The concepts are used across all parts of the agency – including the core treatment program, special treatment programs, academic and vocational education, work, recreation, mental health, and parole.

At different levels of detail, everyone – administrators, line staff, treatment providers, and support staff – receives training in the model. This not only structures the environment to help promote success in changing behavior, it also creates a common treatment vocabulary for all parts of the agency.

In DJJ, a comprehensive vision describing such a model might be something like this:

*The DJJ cognitive-behavioral treatment model pervades every aspect of the agency, its institutions and aftercare. Its principles are transparent, effective, recognizable, and universal. Everyone is a treatment provider.*

### Assessment and Reassessment

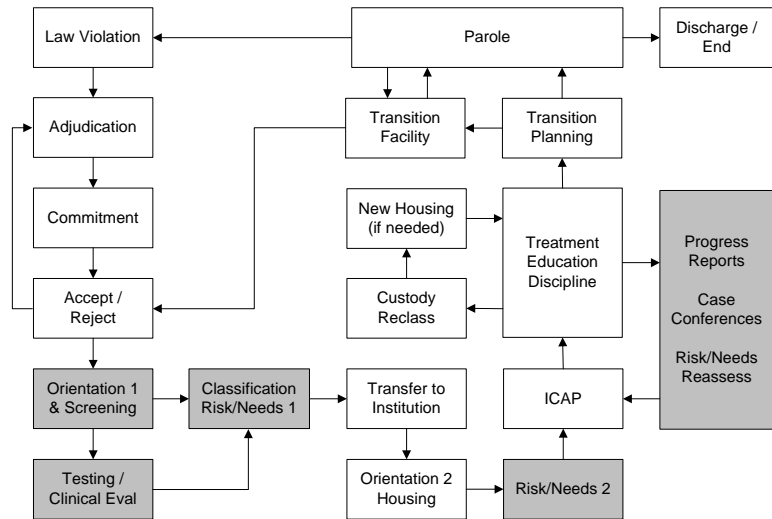
Initial screening is done to identify issues requiring further testing or clinical evaluation. In addition, everyone receives a risk/needs assessment which, together with other testing and clinical evaluation, identifies and prioritizes issues for behavioral analysis and treatment interventions.

A risk/needs assessment tool identifies risk and protective factors in a variety of domains. The following example is taken from Arizona Department of Juvenile

Corrections assessment tool. It has 12 domains. This is two more domains than the JRA model which does not have a separate domain for sexual offending and includes aggression under attitudes and behaviors. The 12 domains in the Arizona system are:

- Risk to Reoffend / Criminal History
- Medical and Mental Health
- School
- Employment
- Family
- Alcohol and Drugs
- Aggression
- Sexual Offending
- Social Influences
- Use of Free Time
- Skills
- Attitudes / Behaviors

Most of these domains have both static and dynamic factors. Static factors are those that cannot be changed through any intervention. For example, it is a static risk factor to have been the victim of sexual abuse or to have grown up in an environment where the parent or caregiver rarely responded appropriately to negative behavior. Dynamic factors are those that can be changed. They include things like the youth's attitudes about drugs or school or authority figures. They can also include things over which other people have control - like having or not having an IEP if a learning disability is involved.



Most domains have both risk and protective factors. For example, a history or presence of a mental illness is a risk factor, but a willingness to address mental health issues is a protective factor. Being fired from work or having uninvolved parents are risk factors, but good work experiences or caring parents are protective factors.

In this kind of assessment, skills refer to personal or social skills such as the ability to control impulses or tolerate frustration. Defined this way, all skills are dynamic risk or protective factors.

In an integrated system, the same instrument used for initial assessment is used for re-assessment. Reassessments only address dynamic risk and protective factors. They measure the progress (or lack of progress) of an individual against all changeable risk and protective factors in all domains. This provides objective feedback on how well a youth is doing. Taken in aggregate, reassessments provide insight into the effectiveness (or lack of effectiveness) of a particular intervention in strengthening the protective factors and/or ameliorating the risk factors that are the intended targets of the intervention.

The initial assessment can be done at a central location, decentralized, or by using some combination of both. Through its Safety and Welfare plan, DJJ has indicated that some assessment will be done at regional reception centers and some after the youth has been transferred to an institution.

Different people are responsible for different parts of the assessment. For example, someone from parole may be assigned the responsibility for doing assessment and reassessment in the Family Domain; someone from education the School Domain. By decentralizing significant parts of the initial assessment, in some domains the same people may be responsible for both initial and subsequent reassessments of a youth. Those who do the reassessments constitute the multi-disciplinary team that periodically meets to review a youth's progress and adjust his or her treatment plan accordingly.

Figure 2, on the next page, shows how this system works. The domains, domain names, where initial assessment takes place, and the people assigned to each domain are for illustration purposes only. It is the concepts that are important. DJJ should adapt this system to its own needs.

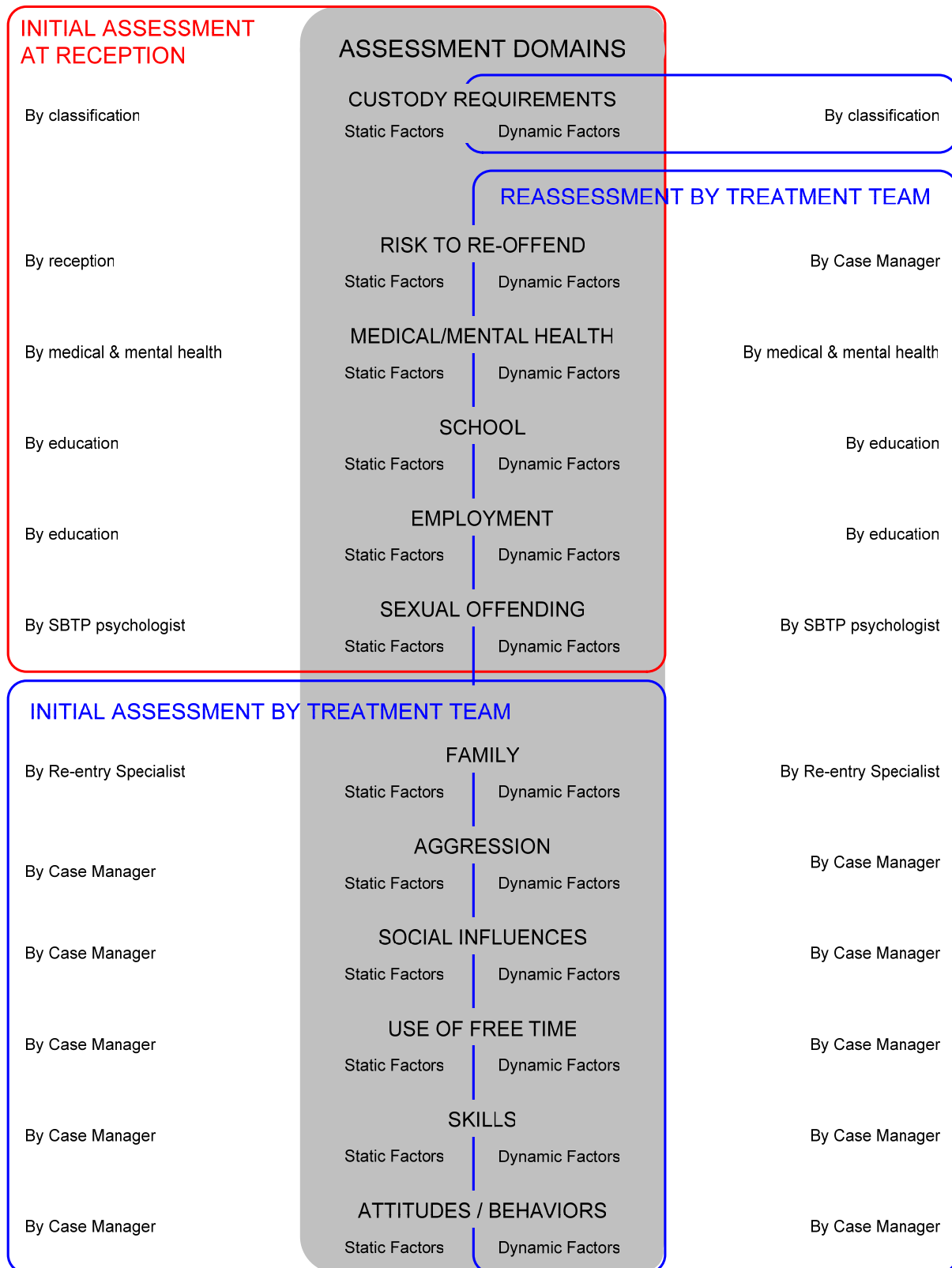
It should be noted that Figure 2 also includes initial assessment and reassessment for custody classification. Custody classification determines the security level at which a youth must be housed. In DJJ that currently means either assignment to a single cell (high risk) or dormitory (all other youth).

Initial custody classification is determined by an objective instrument that calculates the risk of institutional misconduct based on an evaluation of factors that actuarially predict such behavior. (An interim classification tool to do this has been developed for DJJ by Chris Baird of the Safety and Welfare planning team.) Custody classification should also address issues of public safety. Every youth goes through the custody reclassification process on a scheduled basis. A youth's custody level on reclassification is based on behavior since the last classification review.

**FIGURE 2: AN INTEGRATED APPROACH TO ASSESSMENT AND REASSESSMENT**

Initial assessment evaluates static and dynamic risk and protective factors

Reassessment measures changes in dynamic risk and protective factors



### Validity of Assessment Instruments

The assessment and reassessment model described here only works if the questions and scoring are truly predictive of risk and protective factors. Such assessment tools cannot be constructed in an arbitrary way or by vote of committee. Questions should be developed based on research findings and scoring values (weights) for each question established through validation study by a competent researcher. DJJ would be well advised to obtain an assessment instrument that has already been validated in another juvenile correctional setting – even if that jurisdiction’s population is somewhat different than the youth in DJJ confinement. After experience with the tool DJJ can conduct its own validation study based on the population it serves.

### Service Levels

For planning purposes, targets of intervention in each domain should be classified into a hierarchy of service levels. These categories are general and are not intended to reflect a clinical assessment or diagnosis, specific educational classification or other professional classification, but rather to provide DJJ managers with a simple profile of needs for each youth that estimates the intensity and approximate duration of services in each area of need. The service level concept is discussed in more depth later in this chapter.

### Case Management Planning

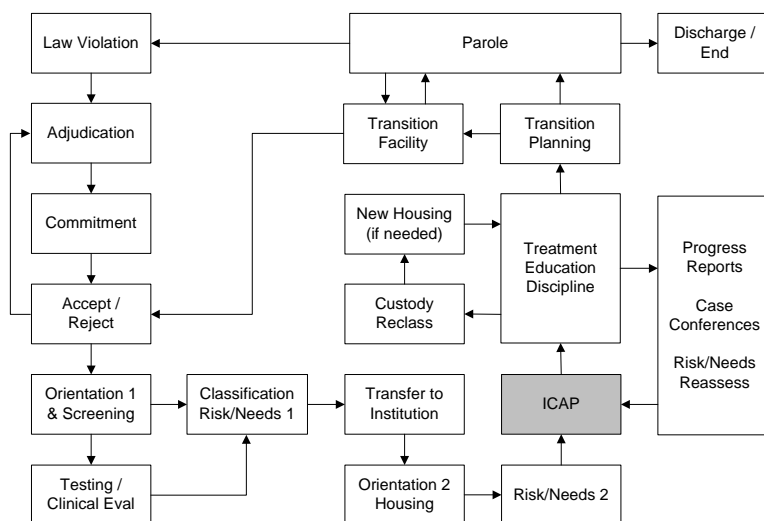
The Case Management Plan includes an overall schedule for the youth’s stay in confinement, transition back to the community, and aftercare services. For each domain in which treatment services are indicated – either by court order, parole condition, or assessed need – the intensity and duration of treatment is estimated based on the expected length of stay determined by the service level indicated for the youth through assessment. The schedule is constructed so that all required treatment can be completed in time for the youth’s initial parole consideration date. Schedules are reviewed and updated based on the progress made by the youth and/or changes in needs determined by assessment, further testing, or clinical evaluation.

The case management plan includes elements that are not specifically cognitive-behavioral treatment. This includes academic and vocational education, work experience and work skills training, and asset-based programs related to interests and abilities in music, literacy, culture, art, leadership, recreational activities, etc. Success in any of these areas increases protective factors.

### Treatment Planning

An individualized treatment plan for each youth is developed and maintained in a document that DJJ calls an Individual Change and Accountability Plan, or ICAP. The ICAP should include the overall treatment schedule as described above under Case Management Planning. In addition, the ICAP should contain identification and prioritization of the issues for which the youth needs treatment.

A central feature of the Integrated





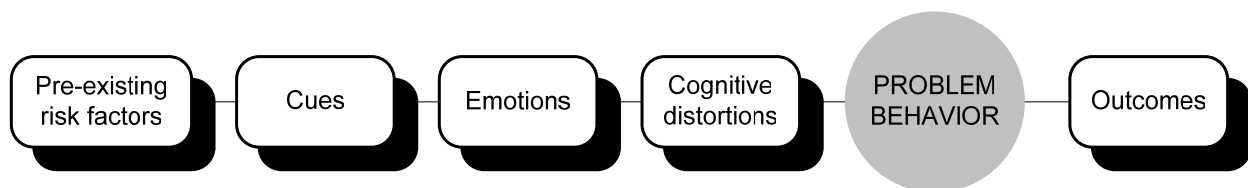
Treatment Model is the use of behavioral analysis in treatment planning. Behavioral analysis has a long history as a research and assessment tool in psychology. It examines the links in the behavior chain, which are:

- Pre-existing risk factors
- Cues
- Emotions
- Cognitive distortions (“thinking errors”)
- Behavioral responses
- Outcomes that reinforce the behavior

Figure 3 illustrates the links in the behavior chain.

### **FIGURE 3: THE BEHAVIOR CHAIN**

(Adapted from *JRA Integrated Treatment Model*, September 2002)



Behavioral analysis is used to discover what the youth’s problem is and to understand how the problem behavior the youth engages in “solves” the problem from the youth’s perspective. Once the purpose of the problem behavior is understood, staff and the youth can begin to develop a treatment plan that attempts to break the behavior chain at multiple points.

Virtually all youth committed to DJJ have multiple problems. While more than one problem can be worked on at a time, it is important to address the most important ones first. An example of a system to prioritize targets of intervention is the JRA treatment hierarchy which prioritizes interventions in the following order:

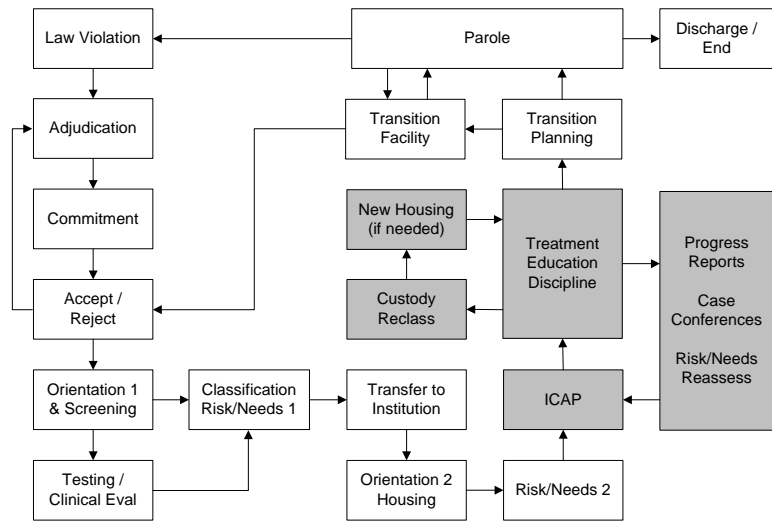
- self-injurious behavior,
- aggressive behavior,
- escape ideation, threats or behavior,
- treatment-interfering behavior, and
- significant quality of life issues.

## Treatment

Cognitive-behavioral treatment includes a wide variety of interventions which are applicable to some, or multiple, parts of the behavior chain. The treatment plan identifies the problem behavior(s) and the links in the behavior chain where interventions should have the best results. The treatment hierarchy identifies which problems are to be addressed first.

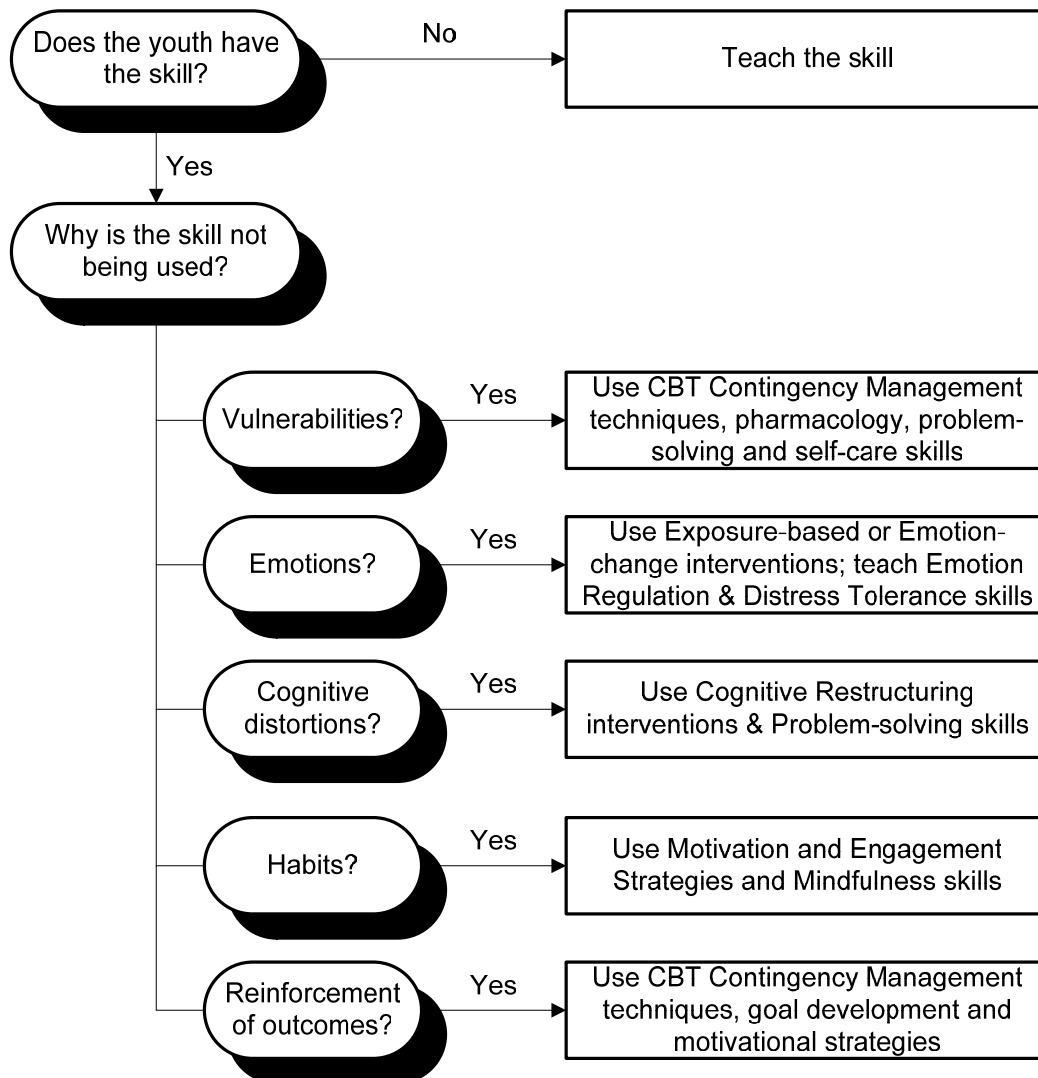
Thus, for example, if a youth has aggressive behavior that is linked to severe anxiety and fear, the treatment plan would include interventions related to emotions. Examples of these are exposure-based interventions and skills training in emotional regulation and distress tolerance. If something in the current environment “solves” the problem from the youth’s point of view but does nothing to remove the problem behavior, then interventions addressing the outcomes portion of the behavior chain are needed. Many types of interventions are available for such situations. The term used in cognitive-behavioral treatment for this collection of interventions is “contingency management.”

Most cognitive-behavioral interventions involve the teaching of skills. In the JRA model, skills deficits are addressed following a decision tree as illustrated in Figure 4. (It should be noted that any appropriate evidence-based cognitive-behavioral intervention can be substituted for those listed here.)



**FIGURE 4: CBT SKILLS DEFICIT DECISION TREE**

(Adapted from *JRA Integrated Treatment Model*, September 2002)



### The Importance of Families

The research consistently shows that positive outcomes for youth are more likely when the family is involved in treatment. Consequently, this should occur whenever possible. Increasing understanding of the causes of problem behavior as well as increasing skills of family members where appropriate will increase the likelihood of long-term success by the youth. Recognizing this, in the JRA Integrated Treatment Model, the overall approach to treatment is organized around five basic functions:

- Motivating and engaging youth and families,
- Enhancing skills of youth and families,
- Generalizing skills to community settings,
- Structuring the environment to promote success in change, and
- Motivating providers who treat youth and families.

When youth are in DJJ institutions this can be accomplished through telephone contact, coordination of case conferences with family visits, and group sessions where family members are invited. Continuing and increasing family involvement is especially important on parole.

#### Applicability to DJJ's Proposed Treatment Modalities

The Integrated Treatment Model is applicable across all cognitive-behavior treatment settings in DJJ including the core rehabilitative/treatment program, the behavior treatment program, specialized treatment programs such as substance abuse, sexual behavior, and mental health. The original concepts were developed for chronically suicidal women and can be applied in gender specific and culturally relevant ways. The model can also be used in parole.

Furthermore, because DJJ has committed to a cognitive-behavioral treatment model and chose its interventions on that basis, the Integrated Treatment Model is entirely consistent with specific programs already proposed by DJJ, including:

- Motivational Interviewing,
- Normative Culture,
- Strategies for Juvenile Supervision and Case Management Classification, and
- Skills teaching and practicing tools such as the components found in Interactive Journaling and the additional materials being created for DJJ by The Change Company.

#### Training

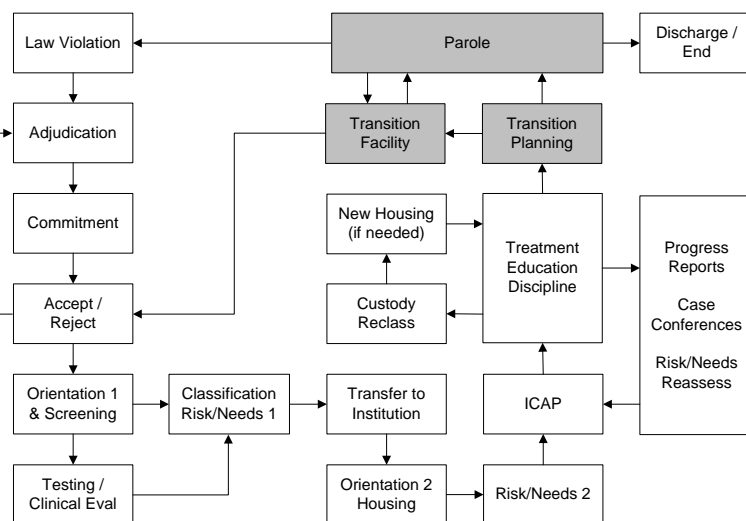
Training in the Integrated Treatment Model is provided to all staff at different levels of intensity. For example, JRA has developed initial training materials for residential and line staff that focus on:

- Cognitive-behavior treatment overview
- Behavior modification components
- Interactive behavioral analysis
- Treatment hierarchy
- Treatment planning
- In-depth skill set overview
- Cognitive-behavioral Treatment documentation

The JRA training module for managers is a 16 hours course that includes all of the above with a shorter overview of skill sets. Support staff receive four hours of audio-visual training that includes a brief overview of behavior modifications components and cognitive-behavioral research, treatment planning, and cognitive-behavioral treatment documentation.

## Transition and Aftercare

DJJ'S November Safety and Welfare Plan describes a process whereby pre-release and preparatory planning begins at the onset of the offender's arrival at the reception center and continues throughout the institutional placement through incorporation of transition and release plans in the offender's initial and updated Individual Change and Accountability Plan. The Safety and Welfare planning team fully supports this approach.



DJJ intends to initiate a Community Assessment Report for each youth upon committed to DJJ. This report will include contacts and interviews with parents and/or close relatives and other people in the community who can provide significant information about the offender. In the assessment / reassessment model discussed above (see page 45) this would be done by the Re-Entry Specialist assigned to the youth.

DJJ's plan for transition services includes creation of dedicated Victims Services Restitution Specialist positions to ensure timely notification to victims/survivors, provide sensitive and responsive services, and to ensure compliance with legal mandates pursuant to the California Victims Bill of Rights. While this is laudatory and perhaps necessary under California law, it does not appear to be an issue included in the Farrell lawsuit.

DJJ also proposes to establish Re-Entry Advisory Committees in each parole region to assist in identification and development of needed community resources.

## DJJ's Proposed Staffing for Transition Services

DJJ's Safety and Welfare Plan and Budget Change Proposal identify a number of new or redirected positions whose primary functions relate to transition services. These are:

- A senior administrator for Lower Risk Youth and Transition Services
- One Re-Entry Specialist for every two core program housing units
- Six Re-Entry Coordinators assigned on a regional basis
- A Vocational Specialist for each institution
- A Victims Services/Restitution Specialist at each institution

Among other things, the senior administrator will be responsible for establishing protocols for furloughs (something that is not currently done) and for working with community providers to provide transition services. This administrator, along with three others, shares 12 support staff, including two Staff Services Managers, six program analysts, and four office technicians.

In DJJ's plan, the job description and responsibilities of existing Parole Agent I's at each facility will be converted to Re-Entry Specialists. Caseloads will be approximately 1:70 with the Re-

Entry Specialists assigned to individuals rather than specific housing units. This is intended to provide continuity when a youth moves from one housing unit to another.

Re-Entry Specialists will participate in case conferences and be responsible for casework guidance for re-entry planning including help with development of individualized parole plans. Re-Entry Specialists will provide liaison to the parole offices, families, other agencies, systems and organizations to improve transition of youth back to the community. One Re-Entry Specialist position will be created for each two Enhanced Treatment Units. These positions will be phased in as the new units are brought on line.

The six Re-Entry Coordinators will work on a regional basis. These Parole Agent II's will be responsible for developing working relationships and linkages with community-based service providers, including group homes, county mental health departments, alcohol and drug treatment providers, education agencies, etc. They will participate in case conferences with local service providers for parolees who are receiving services through multiple agencies. They will meet with institutional staff prior to release to parole to identify placement issues and assess needs for community-based services and develop systems for referring offenders, families and parole agents to resources in the community.

DJJ proposes to add vocational specialists at institutions with vocational programs. Among other things, these staff would be responsible for vocational and career counseling and coordination with parole and Re-Entry Specialists in transition planning.

The Victims Services/Restitution Specialist at each institution are to ensure timely notification to victims/survivors, provide sensitive and responsive services, and to ensure compliance with legal mandates pursuant to the California Victims Bill of Rights.

#### [DJJ's Transition Plans for Youth in Special Treatment Programs](#)

The Sexual Behavior Treatment Remedial Plan includes recommendations and requirements for transition from institution-based treatment to community-based treatment. In this plan the transition process for youth in the sexual behavior treatment program is divided into three phases: Pre-release, Case Management, and Maintenance. During the Pre-release Phase, institution staff, the assigned field parole agent, aftercare therapist, and family members collaborate with the offender to develop the parolee's Transition/Aftercare Program. This program will outline the steps necessary to achieve the offender's therapeutic goals.

Implementation of the Transition/Aftercare Program begins in the Case Management Phase with treatment sessions and supervision contacts in the community that diminish over time. Aftercare is based on a relapse prevention model. The level of services provided during the Maintenance Phase depends on the extent to which the youth has met the requirements of his or her Transition/Aftercare Program. Under the Sexual Behavior Treatment Remedial Plan a youth can be returned to the Case Management Phase as necessary.

The Safety and Welfare planning team has no recommendations regarding transition services for youth in the Sexual Behavior Treatment Program.

Transition services for youth under mental health treatment will be addressed in the Mental Health Remedial Plan.

### Observations on Transition Services by the Safety and Welfare Planning Team

Consistent reference is made in juvenile program research of the need for overarching case management addressing the full continuum from the point of commitment, through institutional programming, transition to the community, and normalization to the point of successful termination. The component parts of case management included by DJJ in its Safety and Welfare Plan and Budget Change Proposal does not include this entire continuum – it ends with transition planning.

The question is: transition to what?

Absent a continuum of services in the community, including alternative placements as step-down, step-back staff-secure and physically secure facilities, staff involved in transition planning will have too few options with which to work.

As noted in the discussion about cognitive-behavioral treatment, once new skills have been acquired by a youth, the objective is to have the youth generalize those skills so that they can be used successfully in the community. The importance of family involvement – both while the youth is confined and during parole – is to improve the chances for continued success.

The issues of what happens after release from confinement, and what resources are available to promote success and catch small failures before they become major ones, is central to the success of juvenile justice reform. Recognizing that these issues are outside the scope of the Farrell lawsuit, we have addressed them in another document.

### **Conclusion Regarding Integrated Treatment, Transition Services and Aftercare**

Issues relating to organization, staffing, and service delivery in DJJ facilities are addressed in the following sections on the Core Rehabilitation/Treatment Program, the Behavior Treatment Program, and specialized programs. With regard to implementation of an integrated cognitive-behavioral treatment program and transition services, the Safety and Welfare planning team has the following recommendations.

**Recommendation:** DJJ can use the cognitive-behavioral interventions it has identified in its Safety and Welfare plan, but the division does not have to reinvent the wheel in terms of how the overall system is implemented. The Safety and Welfare planning team recommends that DJJ adopt and adapt the JRA Integrated Treatment Model. Using this strategy, DJJ can begin implementation of its reform programs at a much more advanced stage than if it tries to start from scratch.

**Recommendation:** Transition and aftercare services are an essential part of successful reform of DJJ as a rehabilitative agency. Since aftercare services are not part of the Farrell lawsuit, we do not address them here. We do, however, recommend that DJJ prepare a comprehensive reform plan for transition and aftercare services outside the Farrell lawsuit. Since implementation of a reform model within its facilities is an enormous undertaking, this planning can wait a year or two. In particular, we note that it cannot take place absent creation of the capacity for change and on-going management as described in earlier in this report.

## **CORE REHABILITATION/TREATMENT PROGRAM**

In its November 2005 Safety and Welfare Plan, DJJ calls the units where the core rehabilitation and treatment program will take place “Enhanced Treatment Units” (ETU). The program in these units consists of the following components:

- Strategies for Juvenile Supervision/Client Management Classification
- Motivational Interviewing
- Normative Culture
- Interactive Journaling
- Intensive Needs Curriculum (in development by The Change Company) - content to include anger management, criminal thinking and behavior, parenting, exiting gangs, victim empathy, coping with trauma, and alternatives to violence
- Additional interventions as identified in consultation with court and nationally recognized experts – especially in the areas of violence reduction, gang integration, substance abuse/dependence, normative culture, and female offenders.

**Commentary:** As noted before, these program elements are compatible with an integrated cognitive-behavioral treatment model such as that described and recommended earlier in this chapter. In the interest of full disclosure, it should be noted that the employer of one of the members of the Safety and Welfare planning team owns the rights to Strategies for Juvenile Supervision and markets it under the name “Juvenile Assessment and Intervention System.” While the Safety and Welfare planning team endorses the use of Strategies for Juvenile Supervision, DJJ selected this well-regarded program before the Safety and Welfare planning team members were identified and their choice was not influenced by any member of the team.

### Placement in a Core Rehabilitation/Treatment Program

Under the DJJ plan, an objective classification system divides youth into three risk levels based on an assessment of the youth’s risk to reoffend. Another objective classification system determines the youth’s security level based on an actuarial prediction of risk of institutional misconduct and threat to community safety. If a youth is not identified as having special needs (mental health, sexual behavior treatment, etc.), he or she will be assigned to a core rehabilitation/treatment program at the facility designated for the age level of the youth (that has space available at the appropriate security level) that is closest to his or her home community. This placement decision is made by central classification while the youth is at the reception center.

### Staffing

As defined by the Budget Change Proposal submitted to implement the November 2005 Safety and Welfare Plan, the Core Rehabilitation/Treatment Program will have 36 to 38 youth per housing unit. Under DJJ’s proposal, these units, known as Enhanced Treatment Units, will have the following complement of staff:

- .5 Psychologist
- .5 Treatment Team Supervisor (Masters level degree required)
- 2 Case Managers with overlapping schedules from 11:00 AM to 8:00 PM. (Masters level degree required)



- 1 Senior Youth Correctional Counselor (off post)
- 1 Youth Correctional Officer (first watch)
- 6 Youth Correctional Counselors (3 on second watch and 3 on third watch)

In addition, various positions are established at each institution as part of the treatment programs. These include:

- A Program Manager responsible for program delivery of services to high- and medium-risk youth at each site
- A Program Manager responsible for program of services to low risk and re-entry youth at each site
- A Strategies for Juvenile Supervision/Client Management Classification Trainer/Quality Assurance Specialist at each site
- A Risk/Needs Assessment and Individual Change and Accountability Plan (ICAP) Trainer/Quality Assurance Specialist at each site
- One Re-Entry Specialist for every two housing units at each site
- A Conflict Resolution Team with four to eight members at each site
- A Volunteer Coordinator/Positive Incentives Coordinator at each site
- A Victim Services/Restitution Specialist at each site
- Vocational specialists at each site to provide vocational and career counseling and coordination with parole and the Re-Entry Specialists

**Recommendation:** Thirty-six to 38 youth in a housing unit is too large. DJJ recognizes this fact when it calls for design and construction of a new prototypical facility with housing units of 20 to 30 beds. However, the latest standards published by the American Correctional Association call for housing units of no more than 16 beds – none of which should be dormitories. These units can be clustered so that staffing efficiencies are possible but each unit of 16 is intended to be able to operate autonomously.

Recognizing that DJJ must work with the facilities it has until replacement institutions can be built, the Safety and Welfare planning team recommends that the 36 to 38 bed housing units be divided into two sections whenever possible. Virtually all of the housing units we saw are divided into wings with showers, dayroom, offices, and YCO/YCC duty station in the middle. Whether there are two wings of dormitories or two wings of single cells, these should be physically divided where possible and surplus space or unused cells converted to offices or, with removal of intervening walls in the single cell units, small group rooms. These wings should then be operated as separate program units whenever possible.

**Recommendation:** The Safety and Welfare planning team believes that every institution will require at least three, and sometimes four, Program Managers. A third Program Manager is needed at each site to coordinate institution-wide programs including chaplaincy, records, the volunteer/positive incentives coordinator, the victim services/restitution specialist, the youth work assignment coordinator, the conflict resolution team, and the site manager for Performance-based Standards. (See “Year One - Step 2: Creating the Capacity for Change.”) It may be that current staffing at institutions provides for coverage of programs such as these. If not, DJJ should request authorization and funding for these positions.

There will also be a need for a fourth Program Manager at sites where there are multiple specialized residential treatment programs for substance abuse and/or sexual behavior treatment.

**Recommendation:** Each site should have a full-time staff person to coordinate work assignments for the institution's residents.

**Commentary:** As noted previously (See "Year One – Step 2: Creating the Capacity for Change") the Safety and Welfare planning team does not believe that the Strategies for Juvenile Supervision/Client Management Classification Trainers or the Risk/Needs Assessment and Individual Change and Accountability Plan Trainers should also be involved in Quality Assurance. This does not mean that the trainers should not act as monitors, consultants, coaches, and resources for helping construct and implement corrective action plans in their areas of expertise.

#### Treatment Team Organization

In the DJJ the Case Manager is responsible for facilitating monthly case conferences of the multi-disciplinary team, conducting the majority of the risk/needs assessment, developing an Individual Change and Accountability Plan (ICAP) tailored to the risk and needs of each youth, coordinating and prioritizing interventions, documenting progress in the ICAP, communicating with parents, guardians, parole officers, and others, and providing weekly individual and/or group counseling on the journaling program. DJJ proposes to have a ratio of one case manager per 10 youth when new ETU housing units are constructed. Prior to new construction, existing units will have a ratio of 1:18 or 1:19.

The Treatment Team Supervisor is responsible for oversight of the daily operations of the living units, including staff supervision, scheduling, discipline, grievances, and reports. This person is the primary liaison between the living units and upper-level institutional management.

The Senior Youth Correctional Counselor is responsible for organizing and supervising the Youth Correctional Counselors in the control and discipline of youth living on the unit, directing the planning unit programs, and providing direct supervision of the Youth Correctional Counselors. The Senior Youth Correctional Counselor is accountable for the cleanliness, security, and order of the living unit.

Youth Correctional Counselors provide direct supervision, behavior management, and maintain a normative culture on the unit. As part of the normative culture model, YCCs facilitate two large group meetings daily – one in the morning and one in the evening. A 1:12 ratio of YCCs to youth is proposed so that three small groups or activities can be run simultaneously during the day or evening.

DJJ proposes that Case Managers, Youth Correctional Counselors, and other facility staff will be trained in Strategies for Juvenile Supervision and Client Management Classification to enhance proactive behavior and case management.

Over the course of the day, staff coverage would be as illustrated in Figure 5.

**FIGURE 5: STAFFING PLAN FOR ENHANCED TREATMENT UNITS**

	10PM								6AM								2PM								10PM							
POST / POSITION	First Watch								Second Watch								Third Watch															
Youth Correctional Officer																																
.5 Psychologist																																
.5 Treatment Team Supervisor																																
Case Manager																																
Case Manager																																
Senior Youth Correctional Counselor																																
Youth Correctional Counselor																																
Youth Correctional Counselor																																
Youth Correctional Counselor (fixed post)																																
Youth Correctional Counselor																																
Youth Correctional Counselor																																
Youth Correctional Counselor (fixed post)																																

In addition to staff assigned to Enhanced Treatment Units, there will be one Re-Entry Specialist for every two ETUs. In order to provide continuity if a youth moves from one housing unit to another, DJJ proposes that the Re-Entry Specialists be assigned to individual youth rather than to specific housing units. Re-Entry Specialists are responsible for re-entry planning and liaison with parole officers, families, other agencies, and local systems and organizations to improve transition of youth to the community.

### Daily Schedule

The frequency of certain interventions – such as treatment groups, individual counseling, resource groups, volunteer groups, and reassessments - varies depending on the youth’s risk level.

For youth in the school program, a typical weekday begins at 6:00 AM with hygiene, breakfast, clean-up, and 15 minute “plan for the day” large group meeting led by a YCC. School is scheduled from 8:00 until 11:00 and 12:00 to 3:30, with a lunch hour between morning and afternoon sessions. For youth in the core program, education takes place off the unit at the school building.

School is followed by recreation time, groups, individual counseling, or case conferences until dinner at 5:00. Between 6:00 until 9:00 PM there is a 45 minute “debrief of the day” large group meeting led by a YCC plus small groups (treatment, resource, volunteer, journal) and recreation. Lights out is at 10:00.

Each youth sees a YCC for 15 minutes each week to review behavioral progress and set goals. Depending on risk level, each youth sees a case manager two to four times per month for 15 minutes to review progress on ICAP objectives and set new objectives as appropriate. Individual counseling is provided by the psychologist or contract treatment provider on an as-needed basis.

Each youth is to have a 30 minute Treatment Team case conference per month. With 36 to 38 youth per unit, this amounts to about one hour of staff time each day for each treatment team member.

A one-hour large group meeting takes place each Saturday to review unit goals from the past week, brainstorm strategies for improvements and to decide how to celebrate successes. A two-hour large group celebration of unit progress takes place each Sunday. Visiting and religious programs take place on the weekend.

**Recommendation:** The busy schedule proposed by DJJ is to be commended. However, we note that the schedule is heavy on therapy and light on asset-based programs such as music, literacy, culture, art, leadership, and recreation. As demonstrated by the well-tested Social Development Model by Professor David Hawkins and others, success in these areas increases protective factors that can counteract the risk factors so prevalent in the DJJ population. This is accomplished by bonding high-risk youths to pro-social adults or institutions. The most effective way to accomplish this is to teach young people new skills and knowledge, give them opportunities to demonstrate to their peers and family members their new proficiencies, and provide frequent and multiple chances to celebrate these new abilities.

Local community based organizations and faith-based groups are often well suited to assist with these asset-based programs. Some of the evening time with volunteers and weekend time should be devoted to development, practice, demonstration, and celebration of these asset-based skills and knowledge.

### Treatment Programs

Under the DJJ plan, in the long run, different housing units may have a specific treatment focus - such as substance dependence, violence reduction, or sexual behavior treatment. DJJ notes that these programs will be developed during the first years of the plan through consultant contracts. One evidence-based program that is specifically identified by DJJ is Aggression Replacement Training (ART). DJJ proposes that this program be implemented during the first phase of the reform plan.

Until other programs are developed and implemented, it is DJJ's plan to have the core treatment program based on the existing interactive journaling program plus additional workbooks for an "Intensive Needs Curriculum" being developed by The Change Company.

**Recommendation:** program content and delivery should be identified and implemented consistent with an integrated treatment model such as that described earlier in this chapter.

### School

The education program is addressed in the Education Remediation Plan. Under California law, students who have not graduated from High School are required to have at least four hours of school per day and an average of five hours per day over a 220 day academic year. For youth in the Enhanced Treatment Units this will occur in academic and vocational classrooms located outside the living unit. School is provide throughout the year.

A primary emphasis of the Education Remediation Plan is to have a standard school calendar for all DJJ institutions and to have other program activities scheduled around the school day so as not to interrupt school. To that end, the Education Remediation Plan calls for creation of a “Program service day.” The Program Service Day is intended to be a coordinated schedule set at each institution by the School Scheduler and a “Treatment Assignment Manager.”

**Recommendation:** The Safety and Welfare planning team supports the idea of creating a “program service day” schedule for each institution and youth. However, it is important that the education day be spread out over many hours – including evening classes and weekends if possible. This is needed to provide flexibility in scheduling residents into individual counseling, case conferences, and the like during hours when key treatment staff are on duty. Coverage by every discipline – including psychologists, case managers, teachers, and other treatment provides – should include some evening and weekend time.

In response to the California Welfare and Institutions Code, the Education Remediation Plan calls for a curriculum “infused with values-based character education.”<sup>11</sup> The Education Remediation Plan further states that each high school “shall use a structured positive behavior management system ...”

**Commentary:** The integrated treatment model described earlier in this chapter is designed to be implemented across all parts of DJJ and its institutions. Its implementation in the classroom environment – including training for teachers – will provide the “structured positive behavior management system” and “values-based character education” called for in the Education Remediation Plan.

### Programs for High School Graduates

About 30 percent of the youth in DJJ facilities over the age of 18 are high school graduates. DJJ’s November 2005 Safety and Welfare Plan calls for developing a strategy to improve access to college course, vocational programs, free venture (work) programs, and work crews.

The Budget Change Proposal for implementation of DJJ’s Safety and Welfare Plan includes a request for resources to increase access and participation in vocational and free venture programs. This includes funding to add vocational specialists to each site and adding staff to obtain grant funds and to promote and facilitate additional free venture programs.

**Recommendation:** The training focus for youth who are high school graduate should either be on post-secondary education through the use of remote learning and other strategies or on acquisition and practice of skills that will help them get a job when paroled to the community. This includes job readiness skills as well as learning specific

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<sup>11</sup> Section 1120.1. (a)

skills associated with a trade or other line of employment. A job readiness curriculum should be developed and a job readiness class should be provided to all youth prior to parole. Vocational education offerings should, whenever possible, be coordinated with the needs of free venture program employers and jobs that can be performed by youth while in the institutions.

The Safety and Welfare planning team's recommendation to add a Work Assignment Coordinator at each institution is intended to provide youth who are not in school or other time-consuming activities with four to six hours of on-campus work each weekday.

A job search program with support staff should be established for youth about to be paroled.

#### Older Youth Who Haven't Graduated from High School

About 70 percent of the youth in DJJ facilities are age 18 or older and about 70 percent of them have not graduated from high school. While many of them should, or may want, to be in school, the question of who is a student is not clearly defined in either the Education Remediation Plan or California law. The DJJ Safety and Welfare Plan does not specifically address this group.

**Recommendation:** Some percentage of the older population of youth who have not graduated from high school either are so far behind or so unmotivated that they will never graduate. The same opportunities for work and work training described above for high school graduates should be the primary program for these youth.

## BEHAVIOR TREATMENT PROGRAM

The Behavior Treatment Program (BTP) described by DJJ in its November 2005 Safety and Welfare Plan is an intensive behavior treatment intervention for youth exhibiting dangerous or other significant problem behavior but who do not require inpatient mental health treatment. Each BTP would house up to 24 youth.

### Staffing

As described by the DJJ Safety and Welfare Plan, the Behavior Treatment Program would have the following complement of staff:

- 1 Psychologist
- .5 Treatment Team Supervisor (master degree required)
- 1 Casework Specialist (masters degree required)
- 1 Senior Youth Correctional Counselor (off post)
- 1 Youth Correctional Officer (1<sup>st</sup> watch)
- 11 Youth Correctional Counselors (3 on 2<sup>nd</sup> watch, 4 on 3<sup>rd</sup> watch, and 4 in on-unit classrooms during the school day)
- 4 Teachers

Each institution will also have a psychiatrist and a mental health staff for acute care and outpatient mental health treatment.

**Recommendation:** One psychologist for 24 high risk youth with problem behavior is not enough. To provide 1.25 hours of individual therapy each week (as described in the treatment plan for these units) takes 30 hours/week in a unit of this size – a full clinical caseload. This leaves no time for group therapy, case conferences, treatment team meetings, etc. Either the units must be made smaller or a part-time psychologist added to each Behavior Treatment Program team.

In addition, various positions are established at each institution as part of the treatment programs. These include:

- A Program Manager responsible for program delivery of services to high- and medium-risk youth at each site
- A Program Manager responsible for program of services to low risk and re-entry youth at each site
- A Strategies for Juvenile Supervision/Client Management Classification Trainer/Quality Assurance Specialist at each site
- A Risk/Needs Assessment and Individual Change and Accountability Plan (ICAP) Trainer/Quality Assurance Specialist at each site
- One Re-Entry Specialist for every two housing units at each site
- A Conflict Resolution Team with four to eight members at each site
- A Volunteer Coordinator/Positive Incentives Coordinator at each site
- A Victim Services / Restitution Specialist at each site
- Vocational specialists at each site to provide vocational and career counseling, and coordination with parole and the re-entry specialists

**Recommendation:** Twenty-four residents in a housing unit for youth with significant problem behavior is too large. The latest standards published by the American Correctional Association call for housing units of no more than 16 beds. Some states run special program units such as this with 10 or fewer residents.

Recognizing that DJJ must work with the facilities it has until replacement institutions can be built, the Safety and Welfare planning team recommends that the 24 bed housing units be divided into two sections whenever possible. Virtually all of the housing units we saw are divided into wings with showers, dayroom, offices, and YCO/YCC duty station in the middle. These should be physically divided and unused cells converted to offices or, with removal of intervening walls in the single cell units, small group rooms. These wings should then be operated as separate program units whenever possible.

With units divided in this fashion it will be necessary to add a fifth Youth Correctional Counselor on the third shift. This will provide two YCCs for each wing of 12 youth plus one YCC at the duty station in the center of the unit. This will provide the same level of resources and out of cell time for youth on each side of the unit. In addition, it provides the opportunity for YCCs to work as a team when larger groups are assembled for when other situations require it.

#### Treatment Team Organization

The Casework Specialist is identified as the facilitator of treatment team meetings and case conferences. The Casework Specialist is responsible for updating the youth's Individual Change and Accountability Plan (ICAP) upon admission to the unit; communicating with field parole officers and others; and representing the unit at all Board appearances, intake interviews, DDMS disposition hearings, and other meetings as required. Under the DJJ proposed plan the Casework Specialist has a caseload of up to 24.

The Treatment Team Supervisor is responsible for oversight of the daily operations of the living units, including staff supervision, scheduling, discipline, grievances, and reports. This person is the primary liaison between the living units and upper-level institutional management.

The Senior Youth Correctional Counselor is responsible for organizing and supervising the Youth Correctional Counselors in the control and discipline of youth living on the unit, directing the planning unit programs, and providing direct supervision of the Youth Correctional Counselors. The Senior Youth Correctional Counselor is accountable for the cleanliness, security, and order of the living unit.

As proposed by DJJ, over the course of the day, staff coverage would be as follows:



**FIGURE 6: STAFFING PLAN FOR BEHAVIOR TREATMENT PROGRAM UNITS**

	10PM								6AM								2PM								10PM							
POST / POSITION	First Watch								Second Watch								Third Watch															
Youth Correctional Officer																																
Psychologist (full time)																																
.5 Treatment Team Supervisor																																
Case Manager																																
Senior Youth Correctional Counselor																	Varies															
Youth Correctional Counselor																																
Youth Correctional Counselor																																
Youth Correctional Counselor (fixed post)																																
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As noted above, the Safety and Welfare planning team recommends adding a part-time psychologist and one additional Youth Correctional Counselor on the third shift to the staffing plan shown above.

#### Entrance Criteria

Under the DJJ plan , a youth having one or more of the behaviors listed below within the last 90 days would be eligible for referral to a Behavior Treatment Program. (DJJ notes that this list is subject to refinement in consultation with national experts.)

- Battery on a staff member
- Battery on a youth with a weapon
- Serious battery on a youth without a weapon
- Aggressor in a group physical attack
- Aggressor in a group disturbance
- Possession or manufacture of a weapon
- Return from a CDCR adult facility where the youth was last assigned to a Special Housing Unit (SHU)

- Validated gang leader currently involved in the direction, promotion, or encouragement of violence or deemed a significant influence in disruption of the facility

**Commentary:** Because it is an issue outside the scope of the Farrell lawsuit, the Safety and Welfare planning team has recommended elsewhere that the state's Welfare and Institutions Code be changed so that once a youth has been committed to an adult facility he or she does not return to a juvenile institution.

**Commentary:** In the absence of underlying behavioral issues that may have led to these things, possession or manufacture of a weapon or being a validated gang leader should not result in referral to a Behavior Treatment Program. Absent an underlying behavioral issue, a youth should be disciplined for such infractions but not placed in a BTP.

### Acceptance Process

Under the DJJ plan, referrals for placement in a Behavior Treatment Program are made to the division's Classification Administrator. A centralized multi-disciplinary team, chaired by the Classification Administrator, reviews referrals and makes a determination if the referral is consistent with entrance criteria and if the placement is appropriate.

**Recommendation:** All youth referred for placement in a Behavior Treatment Program unit must be reviewed by mental health prior to placement. Clinical evaluation indicating a need for placement in a mental health unit shall override a referral for placement in the Behavior Treatment Program.

### Exit Criteria

Under the DJJ plan, upon admittance to the Behavior Treatment Program, the youth's Individual Change and Accountability Plan will be modified by the BTP treatment team in consultation with the treatment team which was previously responsible for the youth. The Casework Specialist has lead responsibility for development of the revised ICAP. The revised ICAP will include behavioral objectives specific to the issues that resulted in the referral to the BTP. These objectives must be met before the youth is returned to a core treatment unit. The treatment team meets with the youth to discuss progress and/or barriers and to adjust the ICAP accordingly.

### Exit Process

A transition plan is developed for the youth once the behavioral objectives in the ICAP are met. Transition activities include:

- Regular visits to the designated home living unit
- School attendance in the core treatment program school area
- Attendance in small group or resource groups with the home living unit
- Identification of any unresolved gang or transfer issues that may affect transition
- Written agreement not to promote, direct, or participate in further violent or disruptive behavior

### Treatment Programs

The Behavior Treatment Program is a behavior modification program based primarily on skills training and positive reinforcement for improvements in behavior. Program components identified by DJJ include, but are not limited to, conflict resolution, anger control, gang

interventions, communication skills, and individual and small group counseling. In addition, DJJ notes that all staff in the Behavior Treatment Program units will be trained in use of Strategies for Juvenile Supervision.

**Commentary:** The integrated treatment model described earlier in this chapter is ideally suited to the target population for the Behavior Treatment Program.

### School

The education program is addressed in the Education Remediation Plan. Under California law, students who have not graduated from High School are required to have at least four hours of school per day and an average of five hours per day over a 220 day academic year. School is provided throughout the year.

Education for youth in the Behavior Treatment Program takes place on the unit in groups of no more than six. Each group has one teacher and one Youth Correctional Counselor assigned to it.

**Commentary:** Finding four classrooms on or very near the living unit that are large enough to accommodate six students and two staff will be difficult. It might be possible to create two classrooms at the end of each wing of cells if the last three cells on each side are removed and two rooms constructed in the vacated space with a dividing wall down what is now the middle of the corridor. Life-safety exiting requirements would have to be addressed if this concept is to be feasible. If this is not possible, modular classrooms will have to be added adjacent to the BTPs.

As noted in recommendations about the school program in the Enhanced Treatment Units, a flexible school schedule is needed in order to provide individual counseling, small groups, case conferences, etc. at times when treatment staff are present. This means that the school day should be extended over a number of hours – including evening and/or weekend classes if possible.

### Programs for High School Graduates

The DJJ Safety and Welfare Plan does not have provision for programs for high school graduates in the Behavior Treatment Program.

**Recommendation:** Vocational education and job skills training should be provided to residents of Behavior Treatment Program units who have finished high school and to those for whom continued academic education is inappropriate.

### **SPECIAL PROGRAMS: Substance Abuse Treatment**

DJJ research staff estimate that up to 80 percent of youth in the division's institutions have some level of substance abuse treatment needs. Consequently, DJJ's Safety and Welfare Plan calls for broadening the substance abuse treatment program and incorporating it into the core rehabilitation/treatment program model. Program assignment would be based on an improved assessment process.

Currently the division provides two levels of substance abuse treatment: a six month program consisting of 20 hours of treatment per week plus school, and a 120 day program offering approximately 24 hours of treatment per week to parole violators. Both are based on a therapeutic community model.

The six month program is delivered through Hazelden's "A New Direction" curriculum, "My Personal Journal" developed by The Change Companies, large groups, and the development of a Personal Life Plan. Youth also receive limited individual counseling plus programming in anger management, gang awareness, victims' issues, and employability skills.

The 120-day program is delivered through Hazelden's "Serenity Series." It is based on the 12-step model, skills acquisition, and relapse prevention. This program also uses The Change Companies' "My Personal Journal." Youth develop a Personal Life Plan and participate in large groups, receive limited individual counseling, and programming in victim issues, gang awareness, and employability skills.

DJJ's Safety and Welfare Plan is not specific about how it would change substance abuse treatment from the current model.

The Safety and Welfare planning team supports DJJ's plan to improve the assessment process and incorporate it into the core rehabilitation/treatment program. In particular, screening and assessment for substance abuse should conform to the service level concept discussed at the end of this chapter. There should be at least three service levels corresponding to:

- Substance abuse education
- Outpatient treatment, and
- Residential treatment

### Assessments

Substance abuse assessments should use nationally recognized assessment instruments and protocols and be conducted by certified chemical dependency counselors or licensed mental health professionals.

Departmental policy should establish criteria for entrance into each level of service, articulate minimum contact service levels, define treatment through approved curriculums and protocols, identify categories of licensed or certified treatment professionals, and establish case management and reintegration standards. The policy or protocol for each level of service should reflect contemporary professional standards of care as established by local licensing or certification standards or by agency professionals.

### Program Content

Because of their developmental stage, interventions for juveniles require somewhat different content and emphasis than those for adults. Motivation and engagement strategies are particularly important with a youthful population. DJJ's plan to train Youth Correctional Counselors and others in Motivational Interviewing is fully supported by the Safety and Welfare planning team.

Behavioral analysis – a basic component for all DJJ cognitive-behavioral interventions – should be used to identify the function of drug using behavior. As with other maladaptive behaviors, an understanding of the function of drug using behavior is the mechanism by which specific interventions are identified that will teach the youth skills appropriate to his or her specific needs.

Skills generalization interventions are also an important component of cognitive-behavioral treatment. The key elements for skills development and generalization in substance abuse are: understanding the function of drug use through behavioral analysis, developing skills for abstaining or reducing the likelihood of relapse, and developing relapse prevention plans.

Training of all residential and line staff in cognitive-behavioral treatment – particularly in the area of skills acquisition – is an important part of effective substance abuse treatment. Use of this model should enable DJJ to deliver most of its substance abuse treatment in regular housing units – either Enhanced Treatment Units or Behavior Treatment Programs. Youth with serious co-occurring mental health issues will require supplemental services and some may require treatment in an alternative setting.

Traditional 12-step programs should be used as a support for skills generalization and relapse prevention. These can be used at the institutions and in aftercare in the community.

Involvement of parents in supporting their child upon return to the community is a particularly important part of relapse prevention.

### Staff Qualifications

Residential substance abuse treatment programs should meet the same standards and licensure requirements as those in the community.

### **SPECIAL PROGRAMS: Sexual Behavior Treatment**

Data in the DJJ Safety and Welfare Plan regarding the numbers of youth mandated by law to have sexual behavior treatment suggests that approximately 8 percent of the males under the age of 18, and 11.5 percent of the males 18 and older fall into this category. With a male population of 2,865 in November 2005, that is equivalent to 66 males under the age of 18 and 236 males 18 and older who are required by law to have treatment. This number understates the total need for treatment beds because others may be identified as needing treatment based on prior offense history (rather than current offense) or because behavior or information only becomes known after commitment.

The Sexual Behavior Treatment Program is described in the Sexual Behavior Treatment Program Remedial Plan that has already been accepted by the court. The following is a summary of that program.

#### Assessments and Treatment Plans

Upon admission to the program, participants are assessed using a standardized instrument to identify treatment needs. An individual treatment plan is developed based on this assessment. The plan is monitored by a multi-disciplinary team on a quarterly basis.

Three levels of treatment are provided: residential, outpatient, and a healthy sexuality class. Higher risk youth may take all of these programs; those assessed with lower treatment needs may only participate in the outpatient program and/or the healthy sexuality class.

It is anticipated that special programming will be developed for low functioning/developmentally disabled youth.

#### Residential Treatment Program

The treatment program includes both residential and outpatient components. The residential program lasts approximately 24 months with 20 hours of treatment per week. The current residential program is broken down into 10 stages. Recommended treatment modalities and frequencies are as follows:

- Small groups co-facilitated by a psychologist and a youth correctional counselor – 3 hours per week
- Two large groups per week lead by a Senior Youth Correctional Counselor – 4 hours per week
- Two resource groups per week on a variety of topics – 3 hours per week
- Individual counseling and case conferences – 4 hours per week
- Homework assignments – 6 hours per week

If appropriate, and the family is willing, at least three family counseling sessions are provided during three of the 10 stages in residential treatment.

After meeting the requirements of the residential phase of treatment, residents move into a maintenance phase while living in regular housing units. Discharge is competency based and determined by measurable objectives relating to treatment completion and goal attainment.

Aftercare in the community is provided while the youth is on parole.

The current treatment model uses a core cognitive/behavioral approach. The treatment model may be revised as evidence-based therapies are identified that are more effective.

#### Outpatient Treatment

Outpatient treatment is provided to youth with mandated or assessed treatment needs who do not meet the criteria for residential placement and for youth in the maintenance stage following completion of the residential program.

The outpatient treatment is self-paced and duration is competency based. Assignments are adjusted based on the youth's abilities.

Outpatient treatment consists of a minimum of 10 hours per week. Recommended modalities and durations are as follows:

- One small group facilitated by a psychologist and youth correctional counselor per week – 2 hours per week
- One 12-week core resource group meeting facilitated by a youth correctional counselor per week – 1.5 hours per week
- Individual work with psychologist, treatment team, or Youth Authority Board – .5 hours per week
- Assigned homework – 6 hours per week

#### Healthy Sexuality Program

A 12-week Healthy Sexuality Class is provided to youth for whom more intensive treatment is not warranted. Each class session is one hour long. Classes may be conducted by educational, mental health, sexual behavior treatment program, or medical staff.

#### Female Wards

The Sexual Behavior Treatment Remedial Plan calls for research into treatment modalities specific to the female population and development of a separate curriculum. The Sexual Behavior Task Force will work with an expert consultant to accomplish this.

#### Transition Services for Youth Receiving Sexual Behavior Treatment

The Sexual Behavior Treatment Remedial Plan describes an aftercare treatment program for youths released to parole. The Aftercare Treatment Program includes weekly group and individual counseling given at local parole offices. Groups will be comprised of no more than eight parolees. The therapists leading the sexual behavior aftercare treatment groups will use a curriculum similar to that used in the maintenance stage of the sexual behavior treatment program in the institutions. This stage concentrates on reinforcement of concepts, therapeutic issues, and relapse prevention techniques.

The transition process for youth in the sexual behavior treatment program is divided into three phases: Pre-release, Case Management, and Maintenance. During the Pre-release Phase, institution staff, the assigned field parole agent, aftercare therapist, and family members collaborate with the offender to develop the parolee's Transition/Aftercare Program. This program will outline the steps necessary to achieve the offender's therapeutic goals.

Implementation of the Transition/Aftercare Program begins in the Case Management Phase with treatment sessions and supervision contacts that diminish over time. The level of services provided during the Maintenance Phase depends on the extent to which the youth has met the requirements of his or her Transition/Aftercare Program. A youth can be returned to the Case Management Phase as necessary.

#### Central Office Staff

A senior psychologist will serve as the Sexual Behavior Treatment Coordinator for the division. The Treatment Coordinator will provide statewide oversight and administration of the program

and will oversee implementation and standardization of the division's sexual behavior treatment program. The Treatment Coordinator will monitor staffing patterns throughout the program and make recommendations for the purpose of addressing on-going treatment needs.

A Research Program Specialist will monitor operations, collect data, conduct research, conduct validation studies of the assessment process and protocols, prepare data for the Sexual Behavior Task Force meetings, and prepare monthly reports for the Sexual Behavior Treatment Coordinator. The Research Program Specialist will be supervised by the Treatment Coordinator.

An Office Technician will provide clerical support to the Treatment Coordinator and Research Program Specialist.

A Sexual Behavior Treatment Consultant will assist the division in implementing the remedial plan.

#### Residential Program Staff

The Sexual Behavior Treatment Remedial Plan calls for four residential programs each providing services to 50 to 60 youth. The plan calls for the following staffing ratios per 50 to 60 program participants:

- One full time Program Administrator
- One Supervising Casework Specialist I
- One Parole Agent I
- One Senior Youth Correctional Counselor
- Three full time Psychologists
- Eight Youth Correctional Counselors (includes vacation relief) on 50 bed programs with closed dorms
- Nine Youth Correctional Counselors (includes vacation relief) on a 60 bed program with open dorms
- One Office Technician

**Commentary:** The Sexual Behavior Treatment Program Remedial Plan was developed prior to DJJ's Safety and Welfare Plan. Consequently, the recommendation to have a residential treatment program for 50 to 60 youth is inconsistent with DJJ's more current thinking and with the recommendations of the Safety and Welfare planning team. The Budget Change Proposal prepared by DJJ in support of its Safety and Welfare Plan assumes a 36 to 38 bed unit size for residential Sexual Behavior Treatment. Unit staff must be adjusted to reflect this smaller unit size. The Safety and Welfare planning team defers to the Sexual Behavior Treatment expert to make these adjustments.

The Program Administrator oversees management and operations of the residential and outpatient programs. The position is responsible for supervising the Supervising Casework Specialist and functional supervision of the psychologists.



The Supervising Casework Specialist acts as program manager and supervises daily operations of the treatment programs. The Parole Agent, Senior Youth Correctional Counselor, and Office Technician will report to the Supervising Casework Specialist.

The Parole Agent is responsible for timely preparation of all reports, scheduling and chairing case conferences, monitoring caseload assignments, communication with field parole, collecting data, and making recommendations at weekly clinical meetings.

The Senior Youth Correctional Counselor manages daily living unit operations and supervises the Youth Correctional Counselors.

Each psychologist is assigned a caseload of 16 to 20 youth. The psychologist provides clinical expertise in development and implementation of each youth's treatment plan.

Three Youth Correctional Counselors will be assigned to each psychologist. The YCC's will have a caseload of five to seven youth each. They will provide eight hours of casework each week, including 3.5 hours for offender groups, 1.5 hours for resource group, and 4 hours for report writing, filing, and providing individual treatment.

The Office Technician will provide clerical support, including filing documentation relating to the audit process, maintaining timelines, and tracking report due dates.

#### Outpatient Program Staff

The Sexual Behavior Treatment Remedial Plan calls for the following staffing ratios per 50 outpatient program participants:

- One full time Psychologist – assigned to work with youth identified for the outpatient Sexual Behavior Treatment Program. The institution Senior Psychologist supervises the Psychologist.
- One Youth Correctional Counselor assigned to work solely with the Out Patient Sex Offender Treatment Program. A Treatment Team Supervisor/Program Administrator will supervise the Youth Correctional Counselor.
- One Office Technician – assigned to complete mandated reports, maintain updates of files, and provide technical support. The Psychologist will supervise the Office Technician

#### Staff Training

All staff working in the Sexual Behavior Treatment Programs will receive initial orientation training and annual in-service training. Adjunct staff (medical, mental health, aftercare clinicians, education, recreational, and security) will receive training in understanding the needs of youth with sexual behavior problems.

The Sexual Behavior Treatment Program Coordinator will monitor training records for treatment staff, administer the training budget, work with program managers to ensure that appropriate and required training is provided, and maintain a resource library for all treatment staff.

### Sexual Behavior Task Force

The Sexual Behavior Task Force will consist of treatment team members from each facility, the Sexual Behavior Treatment Program Coordinator, field parole representatives, and a research program specialist. This group will meet quarterly. Specific tasks for this policy making group include:

- Evaluation of the validity of the Sex Offender Referral Document
- Development of curriculum for the Healthy Sexuality program
- Development of a guide for the residential treatment program
- Development of a policies and procedures manual
- Evaluation of curriculums based on developmental differences and altering assignments accordingly

### **SPECIAL PROGRAMS: Mental Health Treatment**

Policy, staffing, and programs for mentally ill youth will be addressed in the Mental Health Remediation Plan which, at the time this was written, was still in development. It is anticipated that both residential and outpatient services will be provide at most, if not all, sites.

### **PLANNING AND CASE MANAGEMENT THROUGH USE OF SERVICE LEVELS**

The Safety and Welfare planning team proposed a comprehensive “service level” system that integrates policy and protocol, minimum contact standards, treatment curriculums, licensure and certification requirements, and case management and reintegration standards. Among other things, this system results in construction of individual case management schedules for all youth, referrals to appropriate decision makers for placement decisions, and aggregate information to guide planning and budgeting decisions for the division and its institutions.

The purpose of the service level system is to establish agency policies that reflect contemporary standards for screening, assessment and appropriate enrollment of youth in the core program and in substance abuse, mental health, sexual behavior treatment, and developmental disabilities programs. In addition, the service level concept also classifies reintegration and placement needs so that all youth in the system can be tracked by defined service needs categories. To do this, DJJ policy and protocol should articulate minimum contact service levels, define treatment through approved curriculums and protocols, identify categories of licensed or certified treatment professionals, and establish case management and reintegration standards. Policies and protocols should reflect contemporary professional standards of care as established by local licensing or certification standards or by agency professionals.

The classification range of special needs and treatment options are identified for all youth in the system by the assignment of service levels that relate to criteria identified and defined for each category of service. These categories are general and are not intended to reflect the specific clinical assessment, diagnosis, specific educational classification or other professional classification, but rather to provide DJJ managers with a simple defined level-of-service-profile for each youth. In aggregate, service level data by category can assist the Department and facility Superintendents in planning for program services and in understanding the relationship between resource levels and projected needs.

Using substance abuse as an example, the following describes programmatic service levels with defined requirements that reflect agency treatment, re-integration programming, and case management standards.

All youth are given a substance abuse screening by use of a valid screening tool at intake.

1. When a youth is screened as scoring under the threshold for a substance abuse assessment the youth is eligible for enrollment into the approved substance abuse education curriculum as a Level 1 Substance Abuse Youth.

*Level 1 Substance Abuse Services:* Substance abuse education following the proscribed agency curriculum is a core program for all youth not enrolled in higher levels of substance abuse services.

2. Those youth who score above the threshold for an assessment as established by the screening tool receive a comprehensive substance abuse assessment using a valid assessment instrument given by a certified substance abuse counselor or qualified mental health professional.

Assessed youth who are identified as having substance abuse treatment needs fall on a continuum of services that begin with outpatient services defined as Level 2 Substance Abuse Services and ends with inpatient services defined as Level 3 Substance Abuse Services.

*Level 2 Substance Abuse Services:* Outpatient services with a frequency of treatment following an approved curriculum and clear case management requirements. Services are provided by treatment staff with qualifications defined in policy.

*Level 3 Substance Abuse Services:* Inpatient services using the criteria established by state licensing standards for in-patient adolescent residential substance abuse services, established criteria for the qualifications of treatment staff, direct care staff, curriculum, self-contained housing, projected length of stay, and follow up services.

Agency policy reflects local licensing standards where applicable. If there are outpatient adolescent treatment standards that can be adopted or modified then they are incorporated into the policy and protocol. For example:

*Level 2 Substance Abuse Services:* Regularly scheduled treatment sessions meeting xx times per week including individual counseling and participation in substance abuse counseling groups for minimum of xx weeks as conducted by a Registered/Licensed Substance Abuse Counselor. The curriculum or treatment regimen is identified in policy and approved by the agency chief of medical or mental health services. Case management standards are provided to integrate the treatment into the ICAP.

*Level 3 Substance Abuse Services:* Assignment to a therapeutic community or self-contained dorm program for a minimum of xx weeks with an approved curriculum or treatment regimen that meets or approximates licensing standards and federal guidelines for a residential substance abuse treatment unit. Unit staffing meets the

licensing standards and treatment staff are certified or licensed. Case management standards link the treatment to ICAP processes. Length of Stay and reclassification criteria are embodied in the case management reviews.

*ICAP/Case Management/Parole Requirement:* All level two and three youth shall be considered for post-release reintegration services, which provide a continuation of substance abuse treatment in the community on post release status. It is important that the agency policy clearly articulate the case management and reintegration standards to be followed.

This system is used to categorize service level entrance requirements, program content and dosage, staff qualifications, and case management standards for each type of program service provided including: core program, education, sexual behavior treatment, and mental health treatment.

If agency policy is written to articulate these various levels of services tied to valid screening and assessment instruments and treatment protocols, then the treatment needs and service characteristics of the population can be monitored. Data can be used to identify critical needs for additional services and to provide comparative budgetary information. The identification of service levels permits audits against established and documented standards of care.

## **DISCIPLINARY SYSTEM, TIME ADDS, AND POSITIVE INCENTIVES**

Over time, DJJ's institutions have taken on what is essentially an adult corrections model of operations. Attempts at behavior modification are generally limited to punishment. Extensive use of temporary detention, Special Management Program units, and time adds have done nothing to make institutions safer or youth more likely to succeed after they are released from confinement.

This should not come as a surprise. The research literature is clear – punishment is the least effective form of behavior modification. Inconsistent punishments are especially ineffective. In fact, it has been shown that punishment sometimes actually increases negative behavior.

### **Disciplinary System**

According to DJJ, five of its eight facilities do not have a dedicated Disciplinary Coordinator and support staff. The division reports dismissed cases, poor documentation for hearings, and lapses in its ability to monitor the system to ensure due process.

**Commentary:** The absence of an intact, functioning disciplinary process at a single institution should be cause for alarm. Its absence at a majority of institutions is unconscionable. In a system plagued with conflict and problem behavior, providing for a well-run disciplinary process founded on due process principles should be a top priority.

**Recommendation:** The Safety and Welfare planning team fully endorses adding dedicated Disciplinary Coordinators and disciplinary team support staff at all institutions where they are currently lacking.

## Time Adds

California law directs DJJ to “promulgate regulations to implement a table of sanctions to be used in determining parole consideration date extensions.” (Welfare and Institutions Code 1719) “Parole consideration date extensions” are time adds. Time adds may be set by DJJ for “sustained serious misconduct violation if all other sanctioning options have been considered and determined to be unsuitable...” The length of any single time add can be one to twelve months “based on the seriousness of the misconduct, the ward's prior disciplinary history, the ward's progress toward treatment objectives, the ward's earned program credits, and any extenuating or mitigating circumstances.” The law also allows DJJ to develop regulations to establish a process for enabling youth to earn back up to 50 percent of time adds acquired for disciplinary matters. By departmental policy, only level 3 infractions are subject to time adds.

**Recommendations:** The Safety and Welfare planning team has a variety of recommendations regarding time adds.

1. Adopt a policy for suspended imposition of a time add subject to completion of defined conditions to be met within a specified time frame. If the youth meets the conditions, the time add is dismissed by the disciplinary hearing committee. If the youth fails to meet the conditions, the time add is imposed and is subject to 50 percent earn back conditions as set by DJJ policy.

Conditions to be met to avoid imposition of the time add should be recorded in a behavior contract signed by the youth, the Unit Program Manager, Living Unit Supervisor, and Chair of the Disciplinary Hearing Committee. Conditions should be based on successful improvement in specific behaviors tailored to the youth's developmental stage, abilities, and behavioral issues. Conditions should be specific and realistically attainable by the youth in question and the time period for performance should be short – in no case longer than 60 days. Conditions should require positive conduct, not just the absence of misconduct.

The behavior contract should be negotiated by the youth and his or her treatment team. The treatment team should be as currently defined in policy or practice, provided that it is lead by a unit program manager, senior youth correctional counselor or treatment professional familiar with the youth in question. It may be advisable to assign a psychologist or other licensed treatment provider as a consultant to treatment teams as they develop contracts.

Whenever possible, youth correctional counselors and others who come in contact with the youth should coach him or her in strategies to help successfully meet the conditions of the contract.

2. No youth exhibiting significant mental health issues should receive time adds.
3. Reform the appeals process for time adds. Currently, the first appeal is to the superintendent and the second (and final) appeal is to the board. DJJ should add an appeal to the Deputy Secretary or his designee as an intermediate appeal between the superintendent and the board.

4. The DJJ proposal in the November 30, 2005 Safety and Welfare Plan would revise the earn back policy for time adds so that 50 percent of disciplinary time adds can be earned back following six months of good behavior.<sup>12</sup> We believe that this is a step in the right direction. What is missing is a relationship between the amount of time added and the amount of time with good behavior needed to earn half of it back.

It is not right that a youth with six months time added can earn back three months in the same amount of time during which a youth with two months added can earn back only a month. A formula should be developed to resolve this inequality. For example, if the average time add is currently four months and DJJ decides that it should take six months to earn back half the time lost, the agency should require 1.5 months of good behavior for each month of time added. Thus, if the youth had four months of time added, he or she would need  $4 \times 1.5 = 6$  months of good behavior to earn back half of this time. Similarly, if the youth had two months of time added, it would take three months of good behavior to earn back one month of added time ( $2 \times 1.5 = 3$ ). The actual ratio should be computed using the actual average time added.<sup>13</sup>

The Safety and Welfare planning team endorses DJJ's proposal to round up to the nearest month when the formula for earning back time adds results in a fraction greater than or equal to a half of a month.

5. Implement a mechanism to reduce the average amount of time adds imposed during any one year period. SB 1373, in committee at the time this was written, would require that DJJ manage the process so that the net amount of time adds per youth per year would not exceed one month. Such a system was successfully used by the Juvenile Board of Parole in California in the late 1980's.

Such a system requires that time adds be managed like a scarce resource and/or be counter-balanced by time reductions. Time reductions should be tied to earned program credits and be as vigorously pursued as time adds. This can be done through policy and oversight. DJJ does not need a legislative mandate to do this.

6. Implement a system of "good time" so that youths who engage in programs and stay out of trouble can have their parole consideration date advanced.

### Positive Incentives

Positive incentives are an integral part of the integrated treatment model discussed earlier in this chapter. A continuum of punishments and rewards is needed to teach and reinforce the insight and skill needed for residents to make lasting changes in behavior. The use of token economies – which rewards are "purchased" through accumulation of points awarded for positive behavior and effort – is used in the integrated treatment model.

**Commentary:** The Safety and Welfare planning team endorses the use of positive incentives in all DJJ programs.

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<sup>12</sup> "Good behavior" is defined as lack of involvement in serious misconduct (i.e. no Level 3 infractions). Prior policy required 12 months good behavior to earn back half of the time added.

<sup>13</sup> For simplicity's sake, the ratio should be an approximation that does not unnecessarily complicate the calculation.

## **GIRLS**

The DJJ Safety and Welfare Plan calls for hiring consultants to assist with gender specific programs for girls, creation of gender specific modules in the Intensive Needs Curriculum being developed by The Change Company, and soliciting interest by local providers to move girls from the Ventura facility to local facilities and programs operated by others.

**Recommendation:** The Safety and Welfare planning team supports DJJ's proposal to solicit interest by local providers to move girls into local facilities and programs. The girls at Ventura use only a fraction of the capacity of the institution, currently occupying only five of 12 single-celled housing units. As DJJ implements its reform plan and downsizes living units, vacant units at all facilities will have to be reopened. If girls are removed from Ventura, the Ventura facility can become an all male facility. If DJJ is unsuccessful at contracting with local providers for the confinement and treatment of girls, it may be necessary to open a portion of the Ventura facility for males and run a co-correctional program. Existing internal fencing and scheduled use of shared program and support services would be needed to maintain separation of the two populations.

## **Chapter 4 MONITORING IMPLEMENTATION & COMPLIANCE**

DJJ reports in its Budget Change Proposal for implementation of the Safety and Welfare Plan that the division currently has one person specifically dedicated to compliance issues relating to the Farrell lawsuit. This, of course, is completely inadequate for current needs, much less for implementation of as ambitious a plan as this one.

DJJ's proposal to establish a dedicated compliance team of six people plus 11 additional staff to implement Performance-based Standards is fully supported by the Safety and Welfare planning team. The Safety and Welfare planning team has also recommended that a dedicated central office audit staff be created to conduct scheduled and special audits of implementation of division policy throughout the division's institutions and operations. We have also recommended that at least one person at each institution be assigned as an internal auditor. Only with dedicated resources such as these can regular monitoring and reporting take place.

### **Monitoring Issues**

#### Automation

Even with the additional resources outlined above, until suitable management information system capability is in place, monitoring and reporting on implementation and compliance will be dependent upon assembly of fragmentary data – some of it electronic, much of it on paper. Only over time will reporting practices become standardized and data uniformly reliable. Even then, continued auditing of source documents, recorded data, and interviews of staff and residents will be needed to maintain quality standards.

There are two promising developments that should help make monitoring and reporting more efficient and reliable. The first is the pending completion of the WIN Exchange. The WIN Exchange is a bridge connecting free-standing databases at each facility (the **W**ard **I**nformation **N**etwork) that contain large amounts of institution level data. With the WIN Exchange, institutions will be able to share data, and headquarters will be able to obtain and analyze institution level data, in a way that was not possible before.

The second positive development (pending receipt of funding) is DJJ's commitment to implement Performance-based Standards (PbS) throughout the division. PbS provides its own web-based data management system that can be used by any (authorized) computer with internet access. As discussed below, PbS contains data capture and reporting domains that provide key indicators of compliance with issues central to successful implementation of reform.

While these steps will help, DJJ cannot wait for elegant technological solutions to data gathering and reporting. Low technologies, like emailing encrypted data or using spreadsheets to collect and analyze data, should be used as needed. Until better tools are available, strategies such as these will have to suffice.

#### Standard Report Formats

Management and compliance reports must be clear, concise, and useful. Some reporting elements are straightforward yes/no answers ("was this task completed by its due date?"), others



need to report changes over time (“how does the number and rate of incidents of violence during this reporting period compare to previous reporting periods?”)

For elements where changes over time are important, reports should include graphs. Changes over time should generally be reported as both rates and absolute numbers. Graphs should be simple – with each graph depicting one, or only a few, elements.

A standard report format should be developed for each audience for which reports are prepared. Superintendents need to know everything about their institution – reports for them should include identical data elements and be formatted the same at every institution. Headquarters needs to know how the agency as a whole is performing as well as how each institution is doing. The level of detail the Director of Institutions or Director of Operations requires may be more than what the Deputy Secretary requires. Reports to the court and Special Master should probably be similar to those routinely given to the Deputy Secretary. At the same time, the court, Special Master, Deputy Secretary, Directors and others can all get the reports with greater levels of detail that were prepared for lower management levels.

Once standard report formats are adopted, they should continue to be used in the same format until change is clearly necessary.

#### Uniform Rate Calculations

Comparison between facilities of different sizes, or comparison between different time periods when an institution’s population level has changed, require standardized rate calculations. For issues relating to residents, rates should be calculated based on the number of youth confinement days in the reporting period.

“Youth confinement days” is equal to the average daily population during the reporting period times the number of days in the reporting period. For example, if the average daily population for a 90 day period was 300, there would be 27,000 youth confinement days. Because many incident rates are small, this number is divided by 100 resulting, in this case, in a divisor of 270. This, in turn, results in a calculated rate with the decimal point shifted two digits to the right.<sup>14</sup>

#### Regular Reports

Reports for management purposes should be more frequent than reports for outside monitors. This gives management time to see developing problems and take corrective action before someone higher in the chain of command or outside the agency tells them what to do. In general, reports to management should be monthly and regular reports to outside monitors should be quarterly. Of course, the outside monitors can always request more frequent reports. Whatever intervals are established, protocols need to be in place so that standard reports are produced on a standard schedule. Management needs to set aside time on the same schedule to review the reports and plan and take corrective action as needed.

It should be noted that report frequency can affect report interpretation. Spikes in infrequent events take on artificial significance if viewed over too short a time frame. This can be

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<sup>14</sup> The same method is used for certain measures relating to employees. For employees, the divisor in the rate calculation is total employee days during the reporting period divided by 100.

ameliorated by less frequent reports on certain issues or by providing sufficient longitudinal data in each report so that outliers and trends are apparent.

### **MONITORING IMPLEMENTATION MILESTONES**

As noted in Chapter 1, “Implementing Reform,” DJJ, in consultation with national experts is to develop an implementation schedule for each of the components of the plan funded by the legislature. The schedule is to include key milestone dates. As part of the monitoring process, monthly reports should be submitted to the Special Master and other parties showing whether or not milestones for the month have been met or not.

In addition to a schedule for funded elements, the schedule should include those activities necessary to obtain additional funding to continue implementation of the Safety and Welfare Plan in subsequent years.

Recognizing that some elements on a project schedule such as this can flexibly occur at different times without delaying completion of the overall plan, the monitoring process should contain provisions to allow for reasonable revisions to the schedule.

### **MONITORING INCIDENTS OF VIOLENCE**

DJJ uses the following codes to report violent incidents in its Serious Incident Reports. By policy, major incidents are reported to headquarters by telephone as soon as possible and written reports are to be submitted no later than 5:00 PM the following day. The Chief Security Officer at headquarters is responsible for maintaining these records. These data elements are not currently logged in WIN but are recorded in spreadsheets showing incidents per month by institution.

AE1 Attempted Escape with Force  
E1 Escape with Force from Institution  
E3 Escape with Force from Camp, on Fire, or on Grade  
B1 Battery on Ward  
B2 Battery on Ward with Weapon  
B3 Battery on Staff  
B4 Battery on Staff with Weapon  
B5 Battery on Staff with Foreign Substance  
GDGroup Disturbance  
GD36 Group Disturbance with 37/38 mm [gas gun] Discharge  
GDPB Group Disturbance with Pepperball Launcher  
H1 Homicide (Ward)  
H2 Homicide (Staff)  
ME1c Medical Emergency – Ward (Battery)  
ME2c Medical Emergency – Staff (Battery)  
ME3c Medical Emergency – Other (Battery)  
A Sexual Assault (Alleged)

DJJ reports that as of April 2003, B1 (Battery on Ward) incidents have not been reported. Policy and practice must be revised to require reports on all batteries. As a very high priority, this should be changed as soon as possible.

### Other Data Elements to Report

The division's disciplinary system (DDMS) also includes codes involving incidents where violent acts occur. Among other things these codes distinguish between assault (use of force with the intent or effect of doing bodily harm) and battery (use of force without such intent or effect).

Serious Incident Reports involving acts of violence are to include the appropriate DDMS code for alleged misconduct associated with the incident. (Findings of misconduct are subject to determination through the disciplinary process.) These allegations are to be recorded in the log of incidents involving acts of violence. Separate fields should be kept to record actual findings of misconduct as they are reported through the DDMS system.

- 3AH Group battery on a ward without a weapon
- 3BA Assault on staff without a weapon
- 3BC Assault on person not in custody without a weapon
- 3KE Participating in a group disturbance where weapons were used and/or there were injuries requiring hospitalization
- 3AA Battery on staff without a weapon/no significant injury
- 3AG Battery on ward with a weapon or a vile substance
- 3AI Group battery on ward with a weapon or a vile substance
- 3AJ Battery on person not in custody without a weapon
- 3BF Assault on ward with a weapon or vile substance
- 3GD Attempted escape with use of force on a person
- 3GF Aiding an escape with use of force on a person
- 3AB Battery on staff without a weapon/significant injury
- 3AC Battery on staff with a weapon or vile substance
- 3AD Group battery on staff without a weapon
- 3AK Battery on person not in custody with a weapon or vile substance
- 3AL Group battery on person not in custody without a weapon
- 3AM Group battery on person not in custody with a weapon
- 3BB Assault on staff with a weapon or vile substance
- 3BD Assault on person not in custody with a weapon or vile substance
- 3CB Forced sexual act

### Reports

DJJ shall develop standard reports to summarize these data by institution and for the division as a whole. These standard reports are to include graphs showing the frequency of acts of violence for the current month and the preceding 11 months. Rates of violent acts shall be computed for the division and for each institution as described above under "Uniform Rate Calculations." Data may be aggregated by category and over longer time periods as needed to produce graphical depictions of rates of violence that can be readily interpreted by visual observation.

### **MONITORING USE OF FORCE**

DJJ uses the following codes to report use of force in its Serious Incident Reports. By policy, major incidents are reported to headquarters by telephone as soon as possible and written reports are to be submitted no later than 5:00 PM the following day. The Chief Security Officer at headquarters is responsible for maintaining these records. These data elements are not currently logged in WIN but are recorded in spreadsheets showing incidents per month by institution.

DF1 Discharge of Firearm (Ward)  
DF2 Discharge of Firearm (Staff)  
DF3 Discharge of Firearm (Other)  
ERC Emergency Restraint Chair  
B Pepperball Launcher Used  
X Room Extraction  
XC Room Extraction – Chemical  
XP Room Extraction - Physical  
R Soft Restraint to Fixed Object  
RN Soft Restraint Not to Fixed Object

#### Other Data Elements to Report

Any use of force involving chemical agents or sufficient physical force to cause injury is to be considered a serious incident requiring the filing of a Serious Incident Report. The coding system shall be expanded as necessary to standardize reports on the use of force.

Incident reports involving the use of chemicals and other agents shall include the amount of each agent used, the location used, and the names of all youth and staff involved.

#### Inventory of Chemicals and Other Agents

Each institution shall be required to maintain an inventory of all chemical, pepperball projectiles, gas, and any other agents used by staff to quell disturbances or prevent serious injury to residents or staff. Agents issued to individual staff members are to be labeled with a unique identifying number. Chemical canisters are to be weighed using an accurate scale prior to issuance. Weight at issue shall be recorded in the inventory. Purchase orders, receipts, warehouse logs, or other documentation of quantities of agents obtained by the institution shall be kept on file.

Each staff person shall be responsible for all agents issued to him or her.

After each use, and not less than quarterly, all chemical and other agents are to be counted and/or weighed and the inventory updated.

Inventories and purchase records shall be subject to audit at any time.

#### Reports

DJJ shall develop standard reports to summarize these data by institution and for the division as a whole. These standard reports are to include graphs showing the frequency of use of force for the current month and the preceding 11 months. Use of force rates shall be computed for the division and for each institution as described above under “Uniform Rate Calculations.” Data may be aggregated by category and over longer time periods as needed to produce graphical depictions of the use of force that can be readily interpreted by visual observation.

## **MONITORING USE OF RESTRICTED HOUSING AND TEMPORARY DETENTION**

A draft plan for revising DJJ's policies on restricted housing and temporary detention was submitted to the Special Master and both parties in late March 2006.

### Restricted Housing

Restricted housing takes place in Special Management Program (SMP) units. The primary recommendation of the draft plan on policy for restricted housing is that current policy regarding treatment in SMPs needs to be strengthened and enforced. As specified in current policy, residents progress through the SMP program in three stages.

The following is a proposed system for monitoring use of SMPs.

Each institution is to keep a spreadsheet log of youth admitted and discharged from a SMP. The log shall include the date upon which a transition plan was completed for the youth, and the date upon which the youth moved from one stage to another. The format of the spreadsheet should be identical for all institutions and include fields identifying the institution and SMP unit. It should also include fields that automatically calculate the cumulative time a youth has spent in the SMP and the cumulative time spent in each stage of the SMP program.

These spreadsheets shall be sent by encrypted email and/or locked file to headquarters on a monthly basis. A designated staff person at headquarters will consolidate the spreadsheets and prepare regular reports on each institution's use of SMPs.

### Temporary Detention

The draft plan for revising policy on use of Temporary Detention (TD) discusses time standards for how long a youth may be held in TD. As this policy is finalized, a monitoring system similar to that described for use of SMPs should be developed. This system should have the capability of automatically calculating the number of hours a youth is held in TD.

Once Performance-based Standards are fully implemented, various Order Outcome Measures can be used to track the use of temporary detention. (See below.)

## **MONITORING USE OF LOCKDOWNS**

A draft plan to revise DJJ policy on the use of lockdowns was submitted to the Special Master and the parties in late March 2005. In the words of the stipulated agreement, the intent of these revisions is "to minimize the number and duration of lockdowns in the DJJ while ensuring the safe and secure operation of the facilities." The plan calls for establishment of structured goals and standards that guide administrative decisions and operations during periods of lockdown or modified programs.

As this policy is finalized, it should include a timetable for implementation of recommendations and a plan for monitoring implementation and the degree of adherence to adopted standards.

## **PERFORMANCE-BASED STANDARDS**

A national system, Performance-based Standards (PbS), may also be used as a reporting and tracking system for serious incidents. PbS standards offer DJJ a method for periodic sampling of outcome results that are linked to expected practices. There are three primary domains that are sampled from incident reporting characteristics. They are measures of safety, order, and security.

These outcome measures are used in conjunction with other PbS measures to produce reports reflective of the conditions of confinement at each facility. The system has the capacity to do incident mapping and custom reporting based on these data. The measures may be presented in relation to the national field average for participating state juvenile correctional facilities or as a local measure only.

The value of adopting standard measures that relate to reporting in a systematic and uniform way on the conditions of confinement is that it provides managers with vital data that taken together permits analysis of defects and weaknesses in the performance of the system. Following identification of defects and weaknesses, corrective action planning can be undertaken by those with the responsibility for the administration and establishment of safe, orderly and secure environments for youth.

The goals and outcome measures in the safety, order, and security domains are as described below. Use of these measures, either alone or in combination with other data gathering and reporting measures used by DJJ, can provide Superintendents, agency managers, the Farrell Special Master and others another way to monitor changes over time in the safety, order, and security of DJJ institutions.

Where applicable, rates are computed based on the number of youth confinement days during the reporting period divided by 100.

The results of these calculations can be graphed to either show changes over time and/or comparison to other facilities.

#### [PbS Safety Outcome Measures](#)

PbS standards identify three goals against which critical safety outcomes are measured:

- To engage in management practices that promote the safety and well-being of staff and youth and protect staff and youth from intentional and accidental injuries,
- To minimize environmental risks and reduce harm in the use of restraints and isolation, and
- To protect staff and youth from fear.

There are 14 safety outcome measures tracked in the PbS system.

1. Safety Outcome Measure 1: Number of confirmed cases of abuse or neglect over the last six months per 100 days of youth confinement. This outcome measure addresses the number of staff found to have violated regulations and procedures related to use of force, youth care or safety.
2. Safety Outcome Measure 2: Injuries to youths per 100 person-days of youth confinement. This outcome measure addresses the rate of injury suffered by youth as measured by a standard statistical method.
3. Safety Outcome Measure 3: Injuries to staff per 100 staff-days of employment. Comment: This outcome measure addresses the rate of injury suffered by staff as measured by a standard statistical method.

4. Safety Outcome Measure 4: Injuries to youths by other youths per 100 person-days of youth confinement. This outcome measure addresses the rate of injury suffered by youth inflicted by other youth as measured by a standard statistical method.
5. Safety Outcome Measure 5: Injuries to youths by staff per 100 person days of youth confinement. This outcome measure addresses the rate of injury suffered by youth inflicted by staff as measured by a standard statistical method.
6. Safety Outcome Measure 6: Suicidal behavior with injury by youths per 100 person-days of youth confinement. This outcome measure addresses the rate of injury suffered by youth by self-inflicted means as measured by a standard statistical method.
7. Safety Outcome Measure 7: Suicidal behavior without injury by youths per 100 person-days of youth confinement. This outcome measure addresses the rate of suicidal behavior measured by a standard statistical method.
8. Safety Outcome Measure 8: Percent of days during the data collection when population exceeded design capacity by 10 % or more. This outcome measure samples the amount of time overcrowding exists as measured against a known design capacity.
9. Safety Outcome Measure 9: Average ratio of direct care staff to youth for each day during the collection period. This outcome measure provides an average daily staff ratio as measured against the population present.
10. Safety Outcome Measure 10: Youths injured during the application of physical and/or mechanical restraints per 100 person-days of youth confinement. This outcome measure addresses the rate of injury of youth during the application of physical or mechanical (security) restraint measured by a standard statistical method. This relates to one measure of the frequency of use of force employed by staff to effect control.
11. Safety Outcome Measure 11: Assaults on youth by youth per 100 person-days of youth confinement. This outcome measure addresses the rate of assaults experienced by youth inflicted by other youth as measured by a standard statistical method.
12. Safety Outcome Measure 12: Assaults on staff by youth per 100 person-days of youth confinement. This outcome measure addresses the rate of assaults experienced by staff inflicted by youth as measured by a standard statistical method
13. Safety Outcome Measure 13: Percent of interviewed youths who report that they fear for their safety. This outcome measure is taken from youth survey instruments.
14. Safety Outcome Measure 14: Percent of staff who report that they fear for their safety. This outcome measure is taken from staff survey instruments.



### PbS Order Outcome Measures

PbS standards identify four goals against which critical order outcomes are measured:

- To establish clear expectations of behavior and an accompanying system of accountability for youth and staff that promotes mutual respect, self-discipline and order,
- To maximize responsible behavior by youth and staff and conformance to facility rules,
- To minimize the use of restrictive and coercive means of responding to disorder, and
- To maximize opportunities for participation in activities and programs.

There are 12 order outcome measures tracked in the PbS system.

1. Order Outcome Measure 1: Incidents of youth misconduct leading to use of restraints, use of isolation, staff or youth injury per 100 person-days of youth confinement. This outcome measure addresses the rate of misconduct by youth that results in use of restraints, use of isolation, or staff or youth injury as measured by a standard statistical method.
2. Order Outcome Measure 2: Staff involvement in administrative sanction for conduct related to youth (e.g., suspension, letter of reprimand, demotion, etc.) per 100 staff days of employment. This outcome measure addresses the rate of misconduct by staff that results in a disciplinary action as measured by a standard statistical method.
3. Order Outcome Measure 3: Physical restraint use per 100 person-days of youth confinement. This outcome measure addresses the rate of physical restraint incurred by youth as measured by a standard statistical method.
4. Order Outcome Measure 4: Mechanical restraint use per 100 person-days of youth confinement. This outcome measure addresses the rate of use of mechanical (security) restraint equipment on youth by staff as measured by a standard statistical method.
5. Order Outcome Measure 5: Other restraint use per 100 person-days of youth confinement. This outcome measure addresses the rate of use of other security restraint devices on youth by staff as measured by a standard statistical method.
6. Order Outcome Measure 6: Chemical restraint use per 100 person-days of youth confinement. This outcome measure addresses the rate of use of chemical restraint devices on youth by staff as measured by a standard statistical method.
7. Order Outcome Measure 7: Restraint chair or restraint bed use per 100 person-days of youth confinement. This outcome measure addresses the rate of use of restraint chair devices on youth by staff as measured by a standard statistical method.
8. Order Outcome Measure 8: Use of isolation and room confinement and segregation/special management unit use per 100 person days of youth confinement. This outcome measure addresses the rate of use of instances of isolation and room confinement and segregation/special management unit use as measured by a standard statistical method.



9. Order Outcome Measure 9: Average duration of isolation and room confinement and segregation/special management unit in hours. This outcome measure captures the average duration of the use of confinement.
10. Order Outcome Measure 10: Percent of isolation or room confinement and segregation/special management unit cases terminated in four hours or less. This outcome measure captures the percentage of times the use of confinement terminates in less than four hours.
11. Order Outcome Measure 11: Percent of isolation or room confinement and segregation/special management unit cases terminated in eight hours or less. This outcome measure captures the percentage of times the use of confinement terminates in less than eight hours.
12. Order Outcome Measure 12: Average number of idle hours. Average hours per day that youths spend in their rooms or dorms – not including eight hours for sleeping. This outcome measure captures the average number of idle hours youth experience daily.

#### PbS Security Outcome Measures

PbS standards identify three goals against which critical security outcomes are measured:

- To protect public safety and to provide a safe environment for youth and staff,
- To prevent unauthorized exit from the facility and maintain custody of admitted youths, and
- To prevent introduction of, and minimize access to, contraband within the facility.

There are seven security outcome measures tracked in the PbS system.

1. Security Outcome Measure 1: Completed escapes, walk-aways and AWOLs per 100 person-days of youth confinement. This outcome measure captures the average number of breaches of security that represent completed escapes, walk-aways and AWOLs from each facility.
2. Security Outcome Measure 2: Attempted escapes per 100 person-days of youth confinement. This outcome measure captures the average number of breaches of security that are represented by escape attempts.
3. Security Outcome Measure 3: Incidents involving contraband (weapons) per 100 person-days of youth confinement. This outcome measure captures the average number of breaches of security that are represented by incidents involving the presence of contraband.
4. Security Outcome Measure 4: Incidents involving contraband (drugs) per 100 person-days of youth confinement. This outcome measure captures the rate of incidents involving breaches of security that are represented by the presence of drugs as contraband.
5. Security Outcome Measure 5: Incidents involving contraband (other types) per 100 person-days of youth confinement. This outcome measure captures the rate of incidents involving breaches of security that are represented by the presence of other types of contraband.

6. Security Outcome Measure 6: Incidents involving lost keys per 100 person-days of youth confinement. This outcome measure captures the rate of incidents involving breaches of security that are represented by the loss of keys.
7. Security Outcome Measure 7: Incidents involving lost tools per 100 person-days of youth confinement. This outcome measure captures the rate of incidents involving breaches of security that are represented by the loss of tools.